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I DO NOT UNDERSTAND – OR THE ART OF UNDERSTANDING.

**When do language barriers matter in Art Therapy
and how to overcome them?**

A qualitative research into the experiences of art therapists
when working with clients of other language origin.

Anja-Katharina Gallagher

Dissertation submitted to the University of Chester for the Degree of Master of Arts
as part fulfilment of the Modular Programme in Art Therapy.

October 2014

DECLARATION

The work is original and has not been submitted previously in support of any qualification course.

Signature: _____

Date: _____

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LIST OF ABBREVIATIONS

BAAT	British Association of Art Therapists
BBC	British Broadcasting Corporation
CINAHL	Cumulative Index to Nursing and Allied Health Literature
HPC	Health Professional Council
IPA	Interpretative Phenomenological Analysis
NHS	National Health Service
ONS	Office for National Statistics
PsychINFO	Psychological Information Database
UK	United Kingdom
WMA	World Medical Association

ABSTRACT

This research study, placed within interpretivist/constructivist paradigm and informed by phenomenologist tradition, set out to explore art therapist experiences whilst working with clients whose first language was not shared with the art therapist themselves. It aimed to explore questions such as: if language barriers would matter within art therapeutic practice; how and if language difference would be experienced and may influence the therapeutic relationship and processes, and how art therapists would overcome such situations in which communication may have been experienced as difficult. To answer such questions, this enquiry focused upon the strategies employed by the art therapists in order to overcome such difficulties, relating to language difference.

Three monolingual art therapists were interviewed utilising a semi-structured interview approach. Their accounts were analysed through Interpretative Phenomenological Analysis (IPA). Six master themes were identified which were: 'Language barriers / barriers of understanding (general)', 'Client group (bilinguals / language learner) specific observations', 'Language difference = cultural difference', 'Impact on therapeutic relationship', 'Approaches to aid understanding (non art based)' and 'Art as language'.

Based upon these results it was concluded that language difference matters within art therapeutic practice. Art therapy can be seen already as a successful approach, when working with clients whose language origin differs from that of the therapist. However, it was also highlighted that there is a general lack of understanding of wider psychological and psychodynamic implications associated with language difference and bi or multilingualism. Proposing to be cautious upon the role of the image within this unique working relationship and to recognise bilingual/language learning clients as a subordinate client group, it was argued that promoting bilingual awareness and its inherent implications within art therapeutic training and practice would allow art therapy to become a truly powerful therapeutic approach, when working with this, indeed, suborientated client group. Recommendations for further research, art therapeutic training and practice were made.

1.1 GENERAL INTRODUCTION

This enquiry, which is placed within interpretavistic/constructionist paradigm and informed by phenomenologist tradition, seeks to gain and provide further understanding upon art therapist's experiences, opinions and observations when working with clients of other language origin as the art therapists.

It is widely acknowledged that art therapeutic work with clients whose first language is other than English, may increase, especially during times when more and more people move country due to globalised work patterns, conflict, or economic circumstances (Bird, 2012, Bowker and Richards, 2004; Dokter, 1998). Indeed, the latest 2011 Census revealed an increase of migration to the UK (BBC, 2012). At this time, 8% of the UK's residents native language was not English and just 78% of those stated their English proficiency as either very good or good (ONS, 2011). Santiago-Rivera and Altarriba (2002) and Hoffman (1991) point out that half of the world's population is understood to be bilingual, which is in fact more common than monolingualism.

Art therapy is understood to be a non-verbal therapy form, in which the utilisation of art and image-making becomes the predominant communicator of difficult feelings and emotions and can also aid the expression of such feelings which may not yet be manifest in the spoken language (BAAT, 2005). However, language and its proficiency bring with them other implications for the therapeutic processes as simple communication issues. In fact, language is deeply interwoven with culture and thus with a person's identity and sense of self (Thomas and Schwarzbaum, 2006; Hoffmann, 1991). Current art therapeutic literature, however, rarely addresses the

unique implications which a bilingual and/or language learning client may bring to art therapy. Within this context, the purpose of the present study is to gain further understanding of art therapeutic work and the experiences made by art therapists when working with this unique client group. How are 'gaps' in communication experienced and acknowledged and how is the art and image-making process utilised within this unique therapeutic encounter?

The interest to research upon this subject matter arose due to my being a consecutive bilingual person; having learned a second language later in life, and through my work with bilingual and language learning clients during a placement as part of the Master Art Therapy Programme of the University of Chester. Although, being regarded as fluent in my second language (English), there are still situations in which I feel that I am not able to fully express myself. Magnusdottir (2005) explains as language serves mainly a dual function of being a vehicle of thought and an instrument of communication; losing both and adjusting in a second language can cause feelings of not belonging and displacement. When working during a placement with clients who were either bilinguals themselves or in the process of learning English, I observed that some of my clients may have experienced similar feelings and found that my own background was helpful to understand and bridge between image making, translating and therapeutic process. In turn, once settled within art and image making process, verbal communication and expression issues became less important and allowed clients to concentrate upon the primary difficulties they wanted to work on. This led me to research bilingualism and language, with the focus upon art and psychotherapeutic texts. However, I soon found that this subject matter was rarely, if at all the subject of art therapeutic literature. I began to wonder how experienced art therapists would address and overcome these unique circumstances.

Within this **first chapter**, relevant background relating to language proficiency, bilingualism, art therapeutic and/or psychotherapeutic practice will be presented. Finally, the conclusion of the chapter will highlight the importance to research upon this subject matter.

In **chapter 2** the literature search procedure conducted in order to identify literature which informed this enquiry will be outlined. Those studies will then be discussed and brought into the context of this enquiry's interests.

The researcher's aims and objectives will be outlined within **chapter 3**.

Chapter 4 will discuss and present the methodologies and methods used and the research procedures conducted will be outlined. **Chapter 5** will present the research findings and their discussion. The studies limitations will be evaluated and recommendations for future research, training and practice will be made. Finally, the dissemination of the results of this study will be considered.

This research paper will conclude within **Chapter 6**.

1.2 INTRODUCTORY BACKGROUND

Art Therapy

The use of words

Art Therapy is defined as a non-verbal therapy form, which offers especially to those clients who may find it difficult to communicate their emotions and feelings verbally, an alternative of expression (Case and Dalley, 2006; Edwards, 2004). In line with this BAAT (2005) highlights within its definition the expressional properties of visual and tactile media, which are used within art therapeutic practice as predominant form of communication.

Bearing this in mind, it may be not surprising that art therapeutic literature is primarily interested in the need or extent to which way verbal expression is used within the art therapeutic encounter. Moon (1994) for example, sees the image-making process itself truly 'metaverbal' or beyond words, as it arises from deep within the art maker. For him, words are ideally just needed in order "...to serve only to verify for the messages of interaction and validate for the client that their messages have been heard" (p.56). In contrast, Birtchnell (1984) embraces the use of words fully, seeing them as a valuable part of the art therapeutic process. This process is described by him as moving from pictorial expression as a focal point of conversation, to the ability of verbalisation, to bringing the words into action and thus promoting positive change for the client. Exploring this discourse further Malchiodi (2003) suggests that it can become truly beneficial for a client, when allowed to do both, to find verbal expression and to communicate through the art work. This beneficial effect is also noted by Skaife (2000). Observing in an earlier paper (see Skaife and Huet, 1998), tensions between the therapeutic components of image-making and verbal expression within the special setting of art therapeutic groups, to give space to both verbal therapeutic and art therapeutic tools, Skaife (2000) suggests, may enhance the art therapeutic process radically and positively.

The role of artistic expression

Artistic expression is referred to by many as another language in itself (e.g. Malchiodi, 2003; Wilson, 2000; Rubin, 2005; Thwaite, Bennett, Pynor and Zigmond, 2003). Rubin (2009) sees the expression through colour and form as a universal phenomenon. In fact, artistic expression has always been a phenomenon of human expression and is to be found in all cultures (Malchiodi, 2003).

Art therapeutic practice in the UK is predominately informed by a psychodynamic approach to therapy (Hogan and Coulter, 2014). This means that it is informed by two concepts, transferences¹ and boundaries (i.e. place and time of the sessions, their regularity, confidentiality, abstinence, neutrality...) (Molnos, 1995). Whilst conventional psychoanalytical therapies working with transferences and countertransferences arise between therapist and client; in art therapeutic practice the image or artefact adds a further dimension to this dynamic process and thus forms a triangular therapeutic relationship, allowing equal authority to client, artwork and therapist (BAAT, 2010; Edwards, 2004; Case and Dalley, 2006, Learmonth and Huckvale, 2008).

Image making is seen as a 'primary mood of communication' within art therapeutic praxis (BAAT, 2010). Naumburg in Ulman (2012) explains that imagery constitutes symbolic expression and thus serves as communicator between therapist and client. Schaverien (2000, 2008) distinguishes the information which images can carry as diagrammatic (an image which needs further verbal description) and embodied images (whose meaning is deeply symbolic which often need no further verbal elaboration). Images of this quality may also embody a form of transference which may reflect the transferences of the client to the therapist (Schaverien, 2008).

The image and image making processes are further described as tapping upon pre-verbal feelings, making unconscious feelings and conflicts visible and concrete, allowing client and therapist to understand those feelings better and to provide

¹ '**Countertransferences**' is a psychoanalytical/psychodynamic concept based upon Sigmund Freud's observations that the therapist may experience (unconscious) feelings evoked by the client. Resulting appropriate and inappropriate reactions need to be monitored by the therapist as they can be influenced by a therapist own life experiences, and thus may not be linked to a client's situation. Counter transferences can be seen as useful tools to understand not just a client's inner world better (through for example, **transferences** the client may have experienced and resulting countertransferences experienced by the therapist) but also the overall dynamics between therapist and client and thus the therapeutic relationship (Edwards, 2004; Akhtar, 2009).

possible resolution (Waller and Dalley, 1992). Riley (2001) highlights the advantages of expressive art therapies as they offer a non-threatening proceed allowing issues to transit securely into a verbal dialogue. Through artistic expression difficult feelings which were previously restricted can become expressed and verbalised thus allowing the individual to understand them more clearly and work towards solutions (ibid.).

Defining Language

Language is a phenomenon that is common in all human societies. All languages featuring for each linguistic community specific sounds (phonology), grammar (syntax), meaning (semantics) and the knowledge of the specific social context (pragmatics) (Scott and Marshall, 2009; Smith, Cowie and Blades, 2003). Tomasello (2003) defines human linguistic communication as being symbolic, which reflects social convention, in order to allow one human to connect and draw attention to something in the 'outer world' of another human's mental state.

Defining bilingualism/multilingualism

There are many differing definitions of bilingualism, including a diverse range of bilingual typology and ability. (Hoffman, 1991; Santiago-Rivera and Altarriba, 2002). A bilingual or multilingual person can be, for example, an individual who learned different languages from an early age onwards and now uses either language in daily life depending on the person(s) they are talking to and the environments they are in. But a bilingual/multilingual person can also be somebody who was first proficient in one language (mother-tongue) and learned in later life (a) further language(s) (Schrauf, 2000). What combines all definitions is the fact that all

bilinguals/multilinguals are able to express themselves to varying degrees in two or more languages (Hoffman, 1991).

Language – Culture – Identity and Self

Hamers and Blanc (2000) observe that language is commonly seen as an important part of culture. It is defined as a complex entity made up of sets of symbolic systems which include norms, values, knowledge, beliefs, customs, art, language and other learned habits and skills associated with a given society. Language can be seen as a product of culture which, within the process of socialisation is transmitted through the generations, but also shapes culture. Cultural representation is influenced by language itself. Language is also a transmitter of culture, as it conveys an individual's internalisation of the culture's symbolic systems. However, culture and language cannot be seen as homologous, despite the fact that one does not exist without the other (ibid.). In fact, Thomas and Schwarzbaum (2006) point out that culture is one of the most significant elements of identity; not only shaping the way we organise our lives but also defining our own perception of ourselves and others. Therefore, the concept of self² is, closely linked to an individual's role in society. Having to change

² The term 'self' is a 'colloquial term for describing one's own person opposed to others in the external world' (Akhtar, 2009:257) Within psychoanalytical theories, the term or concept of self or the way's a person develops a sense of self, is characterised by many different ideas and approaches. See for example, Freudian concepts of 'das Ich' (ego) (Akhtar, 2009), Carl Jung's model of the psyche, in which the self takes archetypical centre-stage (Stevens, 1994), Winnicott's ideas of formation of self or Heinz Kohuts' 'self psychology' (for further reading please see Akhtar, 2009), to mention just a few scholars who have theorised this phenomena. Interesting in regards to the above interactions of language, culture and identity is maybe Colman (2008) elaborations in this regard, he stresses, that within human communities, the recognition of having a self by others influences not just the way humans treat others or are treated by others, but also upon the way the own sense of self is developed from early developmental stages onwards. "No one can come to 'have a self' except through first being endowed with one in the mind of others" (p.359). Symbolic templates of factors such as social, historical and cultural backgrounds, impacting not just upon interpretations of own self by others (who they think we are, should be and can allowed to be) but also upon the construction of our own being. Hence this leads to two parallel working aspects of self: the expression of self through actions and a psychical expression of self-sense and knowledge, resulting in on-going self-reflexive conditioning of own perception of self (ibid).

to a new cultural environment cannot just be seen as a rupture from an individual culture, its known customs and definition of self, but rather indicate the individual's need to redefine the relation, role and identification with oneself and the new society the individual has adopted (ibid.). In this regard, Hoffmann (1991) draws attention to the powerful relationship of spoken language and the identity of both the individual and a group. This is because language can be seen as a powerful agent to express ethnic, national and self-identity but equally can express separateness. In many ways language reflects the culture of a society and its boundaries between 'insiders' and 'outsiders' as language carries and communicates not just specific culturally constructed ideas but also a society distinctive classification and evaluation of their environment (Smith et al., 2003).

Psychoanalytical and psychological implications

Based upon these interlinked interactions of language, culture and identity, Pérez Foster (1998) highlights that for many developmental psychoanalysts and psychologists, language forms an important factor in the development of a person's sense of self and the way a person learns to make sense of their environment. The symbolic meanings of words, as parts of a specific language, are formed through the inherent dynamics of a linguistic community's environmental needs and thus their cultural conventions. Early pre-symbolic atmosphere of language transmitted by the caregiver and the sound of the 'mother tongue' allows for emotional understanding of words and thus may further function as transitional object³ phenomena based upon

³ In Brief, Winnicott believed that a **transitional object** was created by the infant in order to allow the child to bridge the gap which appears between mother and child during the process of the transitional phenomena (Kilian, 2008). Such objects could be, for example, a teddy or a blanket and would be precious to the child, but could also be ill-treated. This allows the child to explore and to express both love and hate towards the object in a safe way, as the object would not be a real person. Both transitional object and ⁴ **transitional phenomena** (when the child moves away from the dependence of the mother [primary care-giver] to own independence and self (see also separation-individuation) are for Winnicott connected to playing and occur both within the 'potential space' (a space which would appear between infant and mother when the infant would start to

Donald Winnicott's concept of transitional space⁴ through which a person's self can securely develop. In this sense language learning when migrating to another country and culture can have a special role (ibid.). This is also noted by Akhtar (1995) who describes the psychoanalytical processes a migrant may undergo when adapting to a new country/cultural environment. He postulates that in order to adapt successfully, an individual has to go through an immigration-specific 'third-individuation'⁵ process. The language acquisition process itself happens not just in parallel to the individuation process but is also an important agent in order to establish integration. With growing language proficiency the linguistic identity may transform, as associative networks of both the mother-tongue and the new language becomes gradually interwoven. Progressive language proficiency can be seen as a vehicle through which feelings of otherness can be overcome, thus allowing a new hybrid identity to be developed through which experiences of 'ours' and 'we-ness' can be experienced. Even if language proficiency is not achieved to an equal degree, the choice of language can remain reflecting self-representation and to express different aspirations and/or conflict (for further reading please see Akhtar, 1995).

Bilingualism in (verbal) psychoanalytical praxis

Several writers have highlighted that the work with bi/multilingual clients has been well documented back to the beginnings of psychoanalysis. For example, Katsavdakakis, Sayed, Bram and Bartlett (2001), Bowker and Richards (2004) and

move from a merged state with its mother [primary care giver] towards an idea of self and separateness)(Case and Dalley, 2006, Kilian, 2008).

⁵ The object-relationist, Margaret Mahler described **separation-individuation**, according to Kroger (1998), as a process in which an infant internalises representations of their primary care-giver in order to function when the external person is absent. Thus the infant learns to differentiate itself from-its primary care-giver and develops its own sense of self. The second separation-individuation process has been described by Peter Blos, as a time in which adolescents have to relinquish and/or modify such internalised representations of their primary care giver in order to establish a more mature sense of self (Kroger,1998).

Pavlenko (2005) note that Sigmund Freud worked during his own career within different languages and multilingual clients. The case of Anna O. for example, a multilingual client who was observed to switch between her known languages within one sentence, but was often unable to use her native language; German. Beginning to express herself mainly in English, Freud took interest in the fact that Anna O. used French and Italian during more stable periods (ibid.). In 1916 Sandor Frenzi highlighted the differences in perception of bilinguals, when pronouncing obscene words in either their mother-tongue or a second language, which he believed had not the same emotive power when pronounced in the mother-tongue (Katsavdakis, et al. 2001, Bowker and Richards, 2004). Early psychoanalysts as for example Edith Buxbaum, in 1949 and Ralph Greenson, in 1950, observed that the use of the second language can unconsciously become a defence in order to protect the re-emergence of affect-laden fantasies and memories experienced in the mother-tongue. Using the language which is not emotionally loaded can allow for a less chaotic expression of the bilingual client's inner world. Hence, using the mother-tongue was proposed by many of the early analysts, to be important to access such repressed material (Pérez Foster, 1998). In turn, Seay Clauss (1998) adds that, switching into the second language can indicate for possible defences of such affect-laden materials.

Those observations led to a vast interest into connections of language and memory within psychology and psychoanalytical profession. Schrauf (2000) for example, provides here a comprehensive résumé; examine both studies from experimental psychology as well as clinical case reports from psychoanalytical therapy with regard to autobiographical memory access of bilingual clients. These clients had learned a first language through socialisation within their first culture and a second language

through socialisation in a new culture (consecutive bilinguals). Here, the findings suggest that memories made in times of being placed in the country of origin were more emotionally loaded when recalled through the use of the first language. Memory seems to be affected when recalling events which occurred within the country of origin through the use of the second language, compared to recalling such memories through the use of the first language. Taking into account notions of state-dependent learning which influences encoding, retrieval of language and its effects upon bilingual language use, Schrauf (2000) argues that the dual cultural-linguistic self-representation of consecutive bilinguals may act as memory filter of past events.

Suggestions on bridging 'the gap'

Verbal orientated therapists, Cooper and Randall (2002) comment that the question of how to overcome barriers of communication and understanding when working with clients with whom one does not share either culture or language, is a common. However, they suggest that a therapist will often find that processes of listening to non-verbal and pre-verbal forms of communication may have a much more universal quality to its understanding, as the symbolic systems constituting culture, including spoken language. This can form a connection rather than division and can aid understanding and hence the therapeutic relationship and process (ibid.). In order to overcome differences of origin, culture and native language, a good relationship between client and therapist, arisen through a pre-verbal understanding and matching of emotional states, is crucial (Jiménez, 2004).

Remembering the communicational properties of the image and its qualities to surface pre-verbal emotions and thoughts, one could assume this to provide an additional layer to these suggestions of bridging towards understanding.

Concluding thoughts

This initial research provided vast material upon the subject matter and just a fraction of that discovered was presented. However, it provided a greater introductory understanding to work with clients learning towards, or able to express themselves in more than just one language. Bilingualism and language proficiency can bring additional challenges into psychodynamic orientated art therapy and may also have the potential to add additional issues to the difficulties for which clients sought art therapeutic help for in the first place. In fact, the exploration of verbal psychoanalytic literature highlights the impact bilingualism and language acquisition may have upon therapeutic processes. Those able to communicate in two or more languages may reveal through their language choice, possible defences or may even carry feelings of otherness. Especially intriguing is the connection between memory and language and the accessibility of emotional laden material, as this might arguably be of great interest for any psychodynamic/analytical form of therapy.

Cultural awareness is vehemently promoted within the art therapeutic profession (see for example the HPC's 'Standards for proficiency' – art therapists, 2007; or the ethical guidelines provided by BAAT, 2005). However, despite the fact that art therapeutic literature makes aware of cultural differences within artistic expression (see for example Moon, 2006); one may be surprised to find that verbal language, as it is strongly interwoven with culture and thus impacts upon identity and sense of self, does not seem to be the subject of art therapeutic interest. It is tempting to suspect that this may be due to the discourse within the art therapeutic profession, concerning when and in which ways verbal communication has its place within its clinical process. However, the role of the image and the image making process are seen as part of the psychoanalytical approach of art therapy, as they carry

transferences, allowing the communication of pre-verbal and unconscious emotions and feelings which, as they become visible may also allow if necessary, verbal discussion. Indeed, it can be seen as an alternative language altogether. Bearing in mind that verbal orientated therapists, when working with those with whom they do not share a first language, rely simply on non and pre-verbal methods of communication (i.e. body language, mimic, gestures, voice tone level) to aid understanding (see for example Egan, 2010), one could argue that imagery used in art therapeutic processes may indeed bring possibilities to bridge towards understanding through its additional pre-verbal and visualising characteristics. This in mind, it may not just be from interest for the art therapeutic profession to add to its understanding of bilingualism, but moreover to gain further understanding upon current art therapeutic experiences and practice, when working within the backdrop of language difference combined with artistic expression. However, foreign verbal language or bilingualism is not addressed as such within art therapeutic literature, except for two contributions, which will be discussed in the following chapter.

2.1 INTRODUCTION

According to Blaikie (2010) the literature review links a research study to current and relevant knowledge available. The search for such literature is often a continuing process and will take place for the duration of the research project.

This chapter will describe the proceedings used in order to identify relevant literature for this research, concentrating here upon research studies published in either pre-reviewed journals or art therapeutic specific books. Those studies which were identified as relevant were separated into two different compartments: indirectly of interest and directly of interest for this study. Possible implications of interests for this research were summarised as they formed the rationale for this enquiry, conducted in 2012.

2.2 LITERATURE SEARCH; PROCEEDINGS AND OUTCOMES

Due to experiences made during a placement, many academic databases and books were searched for interesting material, before beginning the work for this enquiry (2011-2012). Vast material was discovered of which some has been discussed within the previous chapter. It also revealed two contributions of indirect interest and two studies of direct interest to this research project.

However, as this study concentrates upon the art therapist's experiences in context of bilingual work, a further search of adequate databases was found to be beneficial. According to Bryman (2008), a systematic literature review follows an

explicit procedure, including both published and unpublished studies, through which transparency is ensured and the researcher's bias minimised. Yet, as systematic literature searches are related to positivist epistemology, this search was informed by Bryman's (2008) descriptions of a narrative literature search, as it is linked to interpretivists convictions, and thus relates to the chosen methodology of this study, as discussed in the following chapter. It aims, according to Bryman (2008) to gain an initial impression of the area of interest. Its approach is less focused, wider ranging and thus less straightforward in its criteria for inclusion or exclusion of existing literature (ibid).

Concentrating mainly upon pre-reviewed research studies, CINAHL Plus with full text, PsycINFO as well as Google Scholar within a timeframe 1886-2014 were repeatedly searched, using search parameters in differing combinations, e.g. 'therapist experience', 'art therapy', 'language', 'bilingualism', 'translation', 'psychoanalysis' and 'psychotherapy'.

These searches revealed three more research studies of direct interest to this paper's enquiry.

However, as this enquiry was conducted in 2012, its rationale was based upon the literature available at this point in time.

Research of indirect interest to this enquiry: Art therapy and general use of therapeutic communication

Anderson, Gerber and Appleton (1994) conducted a quantitative research in which the uses of verbal and non-verbal communication components were compared between art and verbal therapeutic approaches. The findings suggested that both

verbal and art therapists used similar verbal and non-verbal communicational methods (excluding imagery), such as paraphrasing, summarisation, matching of posture, gestures and voice tone level, as well as the identification of messages by the client. However, their research was conducted on a small scale, involving one art and one verbal therapist and five volunteers as therapy participants. In particular, the comparison between just two therapists and their employment of such skills may have influenced the overall findings and so may not have led to valid and generalisable results.

Further research here, may contribute to a better understanding of the verbal and non-verbal therapeutic communication skills employed by both types of therapists. Whilst it was observed that the art therapist's responses to the art work (i.e. in terms of paraphrasing the art content and message or reflection of feelings evoked by the art work) were comparable to the verbal therapist's responses to their client's verbally expressed difficulties, it seemed not to have been subject of this comparison to explore any additional non-verbal communicational properties of art therapeutic intervention (i.e. the expression of emotions and feelings which remain difficult to translate into words, and/or those images which need no further explanation). Therefore, further exploration of artistic communication, in this sense, through the eyes of art therapists may prove of great interest.

Using a theoretical enquiry model, Morrell (2011) employed inductive and deductive measures as part of a grand theory approach. Exploring literature from several interdisciplinary theories, in order to derive a theory concerning the relationship of art and verbal language within art therapy, she argued that the variety of disciplines explored may have served to enrich the understanding of the relationship between art and verbal language as well as shared ideas of recipient, internal world and

product. This in combination with observations made within psychological and psychoanalytical disciplines (language/code switching) led Morrell (2011) to suggest that in order to explore and express the '*unsayable*', art can function as sign, intermediary and symbol. The application of such ideas to art therapeutic work may contribute towards positive change for a client, as the therapist is able to guide through a considered switching between artistic and lingual modes of communication. However, Morrell (2011) acknowledged that her findings may not have been specific enough at this stage to formulate a new theory and suggested further research to take additional disciplines into account.

Though, this is not what this enquiry is aiming to address, Morrell's (2011) contribution is still of interest to this study's rationale as it further highlights possible benefits of utilising both the verbal and language of the imagery within art therapeutic practice. Bearing in mind the suggestion to utilise a considered switching between art and linguistic modes of communication, it is interesting to wonder if and how, in this sense, potential language barriers may be overcome when working with bilingual and language learning clients. Therefore, this study will give attention to accounts given by participating art therapists, which may indicate for 'something like' switching between [all] languages available in order to aid communication.

Research of direct interest to this enquiry: Therapists/Client experiences

Verbal orientated therapies

Bowker and Richards (2004) conducted a small scale qualitative study employing semi-structured interviews in order to examine the meanings given by ten individual psychoanalytic therapists and psychodynamic orientated counsellors regarding their experiences when working with bilingual clients who used English proficiently as their

second language. Focusing on questions regarding possible countertransferences experienced by the therapists and the ways they may establish a good working therapeutic relationship when working with this particular client group, their findings suggested that therapists would indeed experience countertransferences, describing these as feelings of distance and separation from their clients. Thus, attempting to achieve a good therapeutic relationship, therapists would, even with very proficient bilingual clients, make an extra effort to listen carefully throughout the therapeutic process in order to be able to bridge gaps of understanding and to establish a better connection with their clients. Non-verbal and other unconscious forms of communication were felt to play a more significant role in work with bilingual clients as compared with a monolingual client group. Bowker and Richards (2004) conclude that therapists need to be sensitised within their practice upon the countertransferences processes associated with language and language proficiency. Sensitivity, especially when working with this client group, is recommended with regard to the power imbalance, where the therapist is in the position of the 'native speaker'. Meanings of words and personal reaction towards, for example the clients accent or language abilities should be acknowledged by the practitioner and should be recognised within the therapist's own supervision. Bowker and Richards (2004) further recommend training programmes, not simply to subsume bilingual with cultural awareness, but rather to recognise both in their own right.

This is very fascinating as it draws attention to the fact, that not sharing the same language with a client can potentially influence countertransferences experienced by the therapist. As language and language difference can constitute not just feelings of belonging, but also of displacement and separation (see Hoffmann, 1991). Something which Akhtar (1995) has pointed out is often

experienced by individuals going through acculturation processes. To question whether finding a shared language, i.e. art, may ease those feelings (experienced by the therapist and/or the client) and thus bridge towards a good working therapeutic relationship may be interesting. Remembering that bilingualism and its further implications appear to be overlooked within art therapeutic literature, the importance of a good working therapeutic relationship is strongly supported, which, in turn, is promoted by the need of the therapist to have a good understanding of bilingualism. Thus, exploring the art therapists experience, their take on this specific client group, their meaning making of possible gaps in understanding and their ways to address this, will be part of this research's attention.

Comparing mono and bilingual therapist's practices, attitudes and beliefs, with regard to the situation of a multilingual therapeutic encounter, Costa and Dewaele (2014) employed a mixed method approach. Firstly, quantitative methodologies were adopted in order to conduct an online questionnaire with closed questions. This was responded to by 83 bilingual and 18 monolingual therapists and concentrated upon interests of therapist-client attunement/collusion, shared understanding/acting on assumptions, freedom of expressions/difficulty of challenging and distance effect of the second language/advantage of shared language. Based upon first findings two bilingual and one monolingual therapists were interviewed using qualitative methods. Both approaches found significant differences between mono and bilingual therapists mainly within the section of attunement and/or collusion with their clients. Bilingual therapists felt that their own experiences were helpful when working with multilingual clients, lessening possible feelings of disconnection and isolation, but also the need, when having shared experiences, to work within clear therapeutic boundaries. This,

of course, was not confirmed by monolingual therapists. Both mono and bilingual therapists agreed that multilingual work had improved their understanding of language use, wording and content meaning. Based upon the fact that none of the therapists had offered to work, when possible, within the client's first language (as psychoanalytical literature suggests in order to access difficult material/memories), Costa and Dewaele (2014) recommended this to become part of psychoanalytical training and supervision, including a general teaching upon the possible impact of multilingualism within psychotherapeutic practice. Further research they suggest would be beneficial to gain an understanding of language switching and mono and bilingual therapists' experiences in this regard.

Having worked with a high number of participants, this study produced a significant insight into mono and bilingual therapists' experiences, when working with multilingual clients. It highlights once more the need for therapists' to be aware of these unique circumstances. This includes the impact of multilingualism upon the therapeutic processes and the need for clear therapeutic boundaries when sharing the experience of multilingualism with clients.

Whilst this paper focuses on other areas of therapists' experience whilst working 'multilingual', and does not set out to compare mono and bilingual therapists, it may still complement Costa and Dewaele's (2014) findings by adding to the collective pool of therapists' experiences, and thus may allow the profession(s) to improve their understanding and in consequence their practises, when working within a multilingual environment.

A qualitative study, conducted by Kokaliari, Catanzarite and Berzoff (2013) focused upon the experiences of bilingual therapists, with regards to their meaning making of

work with bilingual clients and the role of language within this therapeutic encounter. Exploring areas of struggle, language culture implications, impact on transference and countertransference phenomena and learned understanding of this particular working relationship, ten bilingual therapists were interviewed. Their accounts highlighted that allowing clients to use their mother-tongue would, as the literature suggests, allow clients to access difficult materials and to move between experiences made within different lived cultures. It further highlighted that therapists would encourage language switching, but Kokaliari et al. (2013) made clear that this would need to be used mindfully to ensure clients safety (especially if the therapist does not understand the clients language) and also to avoid clients regression. Bilingual therapists showed greater understanding for cultural differences, as they are carried by language. They also presented an understanding of such feelings connected to bilingual living (i.e. the phenomenon of a difference in self-representation within the different languages spoken). Nonetheless, a shared language would not equal a shared understanding. Therefore, transferences and countertransferences in this regard have to be the subject of clinical supervision. Kokaliari et al. (2013) highlighted that their use of a convenience sample may have limited this study's overall findings. They suggested further studies to employ a different sample method and/or to employ a greater number in participants. They also observed that therapists tended to give accounts of their own bilingual experience; a clearer structured interview may help to avoid this.

Nonetheless, this study explored in-depth the experiences made by bilingual therapists. This paper's study, in comparison, did not clarify in its sampling approach for the therapists own language abilities. Yet, participants interviewed for this paper's research were monolingual, which may reflect this study's outcomes. In this respect, both studies may complement each other.

Art Therapy: Therapist experience

Bird (2012) took a postmodern research approach; employing inductive and qualitative research methodology which emphasised the phenomenological experience of art therapists when working with clients of other language origin. Further use of the social constructivist concept of reflexivity and narrative methods were made in order to conduct a literature review. Themes derived from this reviewed literature were then used to inform a predominately unstructured interview. Through the conjunction of the literature and the first interview data, further themes were identified these were: language and the therapeutic relationship, the therapist's own story of language acquisition and translation, the politics or power of language in terms of a predominate use of language and culture within the art therapeutic encounter, and the role of the image itself. These were then used as a basis for a second interview with the participants. Pointing out that the narrative character of the analysis and the postmodern approach taken, allows the reader to make their own interpretation and understanding of the presented material, Bird (2012) concludes, amongst others, that the use of language certainly plays a dynamic part in the art therapeutic relationship formed between image, client and therapist. Where language barriers occur, the willingness to explore and acknowledge personal and social meanings of words will enhance the therapeutic relationship. Making several recommendations to art therapeutic work, he postulates that imagery has not necessarily the potential to compensate for a shared language. Both language and imagery can carry cultural narratives and political implications and should therefore be given reflective thoughts. This also applies to word meaning and symbols, as their interpretation is not necessarily shared; instead the exploration of those differences may enhance therapy (ibid).

Further research, Bird (2012) suggests, such as an ethnographic study, might be beneficial, allowing the researcher and client to investigate bilingual work further, or to explore in more detail the possible occurrence of 'gaps' in communication. He also points out that, due to the studies broad design and in context its small sample size (four art therapists were interviewed), the methodologies employed may have been too 'loose' (ibid.).

This enquiry, not only provided compelling material within this subject matter, but also gave rise to interesting implications for this paper's research design. This is especially reflected in the direct approach of addressing the therapists' experiences of possible gaps in understanding within this specific working relationship.

Art Therapy: Client experience

Roberts (2013) conducted qualitative research into the experiences of bilingual clients receiving art therapy, with the first spoken language being Welsh and the second English. This study was set within the background of a predominantly English speaking Health system in Wales. Utilising phenomenologist and heuristic methodologies in conjunction with semi-structured interviews and artistic enquiry methods, Roberts found that having to express oneself in a second language impacted upon the overall therapeutic experience of a client. For example, participants gave account about their ease in expressing themselves within their mother-tongue and conversely their feelings of the loss of important information in translation. Highlighting the role of the image, Roberts (2013) underlined Bird's (2012) recommendations that the image should not be altogether understood as an alternative language. It may offer, however, an additional possibility of expression. Next to further research into art therapy and the impact of therapeutic experiences of Welsh/English bilingualism, she recommends that art therapists should be aware of

the implications this may bring to the art therapeutic encounter and postulates that cultural and language awareness should become subject of art therapeutic training programmes.

Despite this, her study may have been compromised by its small scale, and the fact that Roberts herself, participated in her study. Her enquiry is still of great interest for this study, as it is the only research discovered which explores bilingual clients' experiences within the context of art therapeutic practice. It highlights the clients' perceptions, in terms of making themselves understood and the impact upon the art therapeutic exchange and inherent difficulties. Thus, Roberts' (2013) study draws further out why it is important to research bilingualism within the realms of art therapeutic practice. [Any] further research may indeed add to the understanding of the relationships between client, therapist, language and image and thus may allow art therapists to offer a more sensitive and informed approach to their practice within these unique circumstances; which in turn enhances the art therapeutic process and outcome.

2.3 CONCLUDING THOUGHTS

The literature discussed so far clearly highlights bilingualism and language difference, and has indeed, implications for any psychoanalytical form of therapy. Whilst there is a general lack of theoretical art therapeutic literature, which is concerned with bilingualism and its implications, it becomes clear that the subject of bilingualism provides extensive theoretical concepts and material within literature of other professions. In comparison empirical research from interest to this study, provided by both verbal and art therapeutic researchers, however, appears rather limited. The lack of research and the need of further exploration of bilingualism and

its impact on therapeutic practice was indeed highlighted by some of the studies discussed.

Nonetheless, research presented within this chapter allows for first insights into therapists' experiences when not sharing the first language with their clients.

Arguably mirroring the lack of bilingualism in general art therapeutic literature, only two studies, conducted by Bird (2012) and Roberts (2013) were particularly interested in bilingualism within the art therapeutic encounter. Bird's (2012) findings and especially his thorough descriptions of his research design, were found to be of great interest for this study's design and outset.

Research discussed up to 2012 became the foundation of this research project; however, later research as it has been presented here, will inform the study's overall findings and outcomes, bringing this study into the context of current knowledge and understanding upon the subject matter.

Based upon the literature available up to 2012, and additional literature discussed as part of the introductory chapter, the following key areas have been identified to be addressed within this papers enquiry:

- When do (verbal) language barriers matter in art therapeutic practice?
- How does bilingualism / language proficiency, or in other words, situations in which therapist and client do not share the first language, impact upon understanding and interpretation of the artwork and hence upon the therapeutic processes and therapeutic relationship?
- How do art therapists work with, acknowledge and overcome possible communication barriers?
- Do art therapists experience a 'gap', which is difficult to overcome and how do they explain this?

In order to answer these points, the aim of this study is to explore and gain further understanding of art therapist's experiences when working with clients of another language origin. The study will focus upon the ways art therapists may overcome certain language barriers through either verbal strategies or in particular through art making and the characteristics of those situations in which they may experience difficulties whilst doing this.

4.1 INTRODUCTION

Based upon this study's aims and objectives, this chapter is concerned with the study's methodology and the methods adopted. Within its first part, philosophical and theoretical perspectives and those positions chosen to inform this study will be discussed. In the second part, the study's research design, the methods adopted and procedures conducted, will be outlined. This will include the ethical considerations made, informing the research processes.

4.2 METHODOLOGY: PHILOSOPHICAL AND THEORETICAL FRAMEWORK

Paradigm

The ideological or philosophical standpoint, a research's paradigm ultimately constitutes its methodology and thus the convictions and approaches through which knowledge is believed to be gained (Broom and Wills, 2007). Qualitative methodology highlights an inductive relationship between theory and research, with the focus on creating theory. In its strategy of collection and analysis of data, the qualitative approach emphasises narratives rather than quantification which is mainly based on an interpretavistic paradigm (Bryman, 2008). In contrast, quantitative research methodology is based on deductive research strategy and positivistic paradigm. It employs numerical procedures and measurement in order to study phenomena (Mark, 1996). Bryman (2008) adds that the collection of numerical data is used for the assignment of the deductive relationship between theory and research and seeks to approach research in line with natural science (positivistic view) and to

apply research with an objective concept of social reality (Bryman, 2008). Whilst positivist paradigm follows an epistemological standpoint, that knowledge is gained through application of scientific methods from natural science based upon the ontological view that reality is fixed and can be tested objectively (objectivism) (Bryman, 2008; Broom and Willis, 2007), interpretivism in contrast, focuses upon an understanding based upon a constructivist ontological position that in reality is subjective. Knowledge, for interpretivists, is constructed by individuals and groups depending upon their various historical and social contexts, which influences their meaning making of the social world, its negotiation, management and hence its construction (Broom and Willis, 2007).

Rather than seeking to deduct and measure data, this study seeks to explore and to gain an insight into art therapists' experience and views upon the work with clients of other language origins to themselves. Thus, this enquiry is best placed within an interpretavistic/constructionist paradigm.

Yet, it may be worth noting that qualitative methodologies (data collection and analysis) may entail some possible constraints. Mainly those following a positivist paradigm criticising its approach for being too subjective (Bryman, 2008). Findings of a conducted research may rely too much upon the researcher's own views and decisions about what may be seen to be of importance and tend therefore to be biased. Subjectivity may also influence the entire process of enquiry, which often starts off relatively open ended, lacking then out of positivistic view explicitness at the outset and transparency in its decision-making process. This may also impact upon the reproducibility of a particular research (ibid.).

Nonetheless, Broom and Willis (2007) make clear that subjectivity as well as complexity are indeed at the heart of interpretive research, which "seeks not necessarily to count or reduce, but to represent rich, subjective experience in such a

way as to reflect on consistencies and parallels, while retaining the various nuances of the data”(p.26).

Further critique has been noted, in terms of generalisation as often the small sample sizes employed in for example, unstructured interviews or participant observations are seen to be unable to represent an entire population. However, rather than generalise a population, qualitative research aims to generalise theory (Bryman, 2008). Broom and Willis (2007) agree, (perfectly summarising this study’s interests and therefore its chosen approaches), arguing that qualitative research is less focused upon external validity or its generalisability, due to its relationship with interpretivists/constructionist world views. It focuses instead upon different positions, meanings and experiences made by different people within the context of specific events, claims and/or actions (ibid).

Phenomenology

Interpretativistic research traditions, such as phenomenology, ethnomethodology, symbolic interactionism, postmodernism and others, each follow slightly different avenues when studying phenomena (Mason, 1996). Ethnomethodology, for example, is interested in the ways conversation and interaction contributes to social order and is associated with conversation analysis (Bryman, 2008).

However, as it is in line with this study’s interests, Phenomenology also known as phenomenological-hermeneutics (interpretative), will inform this enquiry. It is concerned with the understanding of the ways individuals interpret, experience and perceive their world and upon the way the researcher avoids/acknowledges personal preconceptions in their own understanding (Barker, Pistrang, Elliott, 2002; Bryman, 2008).

According to Reiners (2012), phenomenology is a philosophical movement of enquiry which was founded by Edmund Husserl (1859-1938), who was opposed to objective paradigm, which emphasised that knowledge could be measured and detached from human interactions. Phenomenologist enquiry is informed by several streams of thought upon how phenomena is explored (Holloway and Wheeler, 2010), whereby the following discussion will concentrate upon the descriptive phenomenology developed by Husserl and the hermeneutic (interpretative) phenomenology developed by Martin Heidegger (1889-1976).

Husserl believed that human meaning making and experience were the foundation of consciousness. 'Intentionality', (in brief) a person directed consciousness or awareness of an event or object was for Husserl the essence of the experience of thought, memory, perception and imagination (Reiners, 2012; Holloway and Wheeler, 2010). Those conscious actions would come to light by description, thus a phenomenologist following Husserl's approach would refer to it as descriptive phenomenology. Next to intentionality, 'bracketing' is another key element of descriptive phenomenology, as it requires a researcher to gain and to represent a participant's experience, without involving own knowledge, experiences and preconceived ideas, judgements and beliefs (Holloway and Wheeler, 2010). Thus, a researcher interested in describing a phenomena would attempt to bracket their own biases (Reiners, 2012).

Influenced by the philosophy of hermeneutics (interpretation) Heidegger believed that the nature of human understanding is hermeneutic and thus missed in Husserl's approach, the acknowledgement of interpretation or possible biases (Lewis and Staehler, 2010; Reiners, 2012). Developing interpretative phenomenology, his interests was to seek an understanding of 'Dasein' (being/existence), which he saw to be temporal. Believing that a person's world is made of their history, language and

culture, the appreciation of a person's life context and the acknowledgement of individual every day, natural and practical activity, was for Heidegger essential in order to study phenomena and was consequently achieved by the active reflection of personal world experience (Lewis and Staehler, 2010; Holloway and Wheeler, 2010). Rather than emphasising human consciousness and knowledge, human existence was more fundamental for Heidegger in order to gain an understanding of everyday world experience, which was in his view essentially interpretative (Dahlberg, Drew and Nystrom cited in Reiners, 2012).

As this research study does not attempt to describe art therapists' experiences when working with bilingual clients and moreover aims to gain understanding of their meaning making, its phenomenologist tendency is hermeneutic. Indeed, according to Reiners (2012) a researcher who is interested in the meaning of phenomena, whereby the researcher does not bracket out personal bias and knowledge would choose hermeneutic phenomenology. This will be reflected through the choice of employing IPA as analysis method.

4.3 METHODS

Ethics

Within the context of social and/or medical research, the term 'ethics' refers to the establishment of codes of good and moral research behaviour and practice (Mark, 1996; May, 2001; Hammersly and Traianou, 2007). In 1964 the first set of internationally recognised ethical research principles were outlined within the 'Declaration of Helsinki'. Its ongoing revision (the latest version was published in 2013) provides basic principles and guidance for medical research with human subjects (Holloway and Wheeler, 2010). Those principles would include: *'respect for*

autonomy’, which guides the researcher to obtain independent, free and informed consent as well as the right to refuse participation; both *‘nonmaleficence’* (avoidance of harm) and *‘beneficence’* addressing the need to balance carefully the research benefits against the risk for the participant, whereby the consideration of the participants’ health and wellbeing is paramount. The principle of ‘justice’ is concerned with the fairness of research procedures and strategies, including the insurance of a well considered and diverse representation of a research population (WMA, 2013; Holloway and Wheeler, 2010). Connected to these principles, according to Holloway and Wheeler (2010) are ethical rules which underpin today’s research and ethical practice and are also based within the ‘Declaration of Helsinki’. These include: *‘veracity’* (the need to truthfully inform about the research), *‘privacy’* and *‘confidentiality’* (before breaching privacy and confidentiality informed consent must be obtained), and *‘fidelity’* (potential conflicts of interests, between participant, researcher and eventual involved third parties must be openly addressed) (WMA, 2013; Holloway and Wheeler, 2010).

Ethical processes and approval

Throughout this study’s design process and its realisation, the considerations of possible ethical issues was of upmost importance. As this study is based around the accounts given by art therapists the implementation of the above discussed ethical principles and rules were given great care. This was strengthened by the University of Chester’s requirement to undergo a research application process, as part of the University’s Master Art Therapy programme (part of the Faculty of Health and Social Care). This included not just to demonstrate that the research is purposeful and methodologically thought through, but also that the researcher has taken appropriate measures to ensure ethical practice. This included considerations to avoid potential

harm and distress, potential benefits for the participants, the researchers own health and safety, recruitment (its criteria, reimbursement and the relationship to the researcher), informed consent and confidentiality and the management of the collected data. Considering for example the principle of *nonmaleficence* it became clear that within the nature of interviewing art therapists about their experience with a certain client group, there may be a danger that during the interviews art therapists may disclose information of their own clients to whom they themselves are bound to ensure confidentiality. Therefore, the interview was designed to minimise the risk for the participating art therapists to breach conduct and thus avoid harm and distress. Possible client related information, if still subject to the data collected, would not become subject to this investigation, anonymised, treated confidentially and in line with the Data Protection Act-1998. In order to obtain informed consent and confidentiality, participant information sheet (Appendix C) and a consent form (Appendix B) were prepared as part of the ethical approval process and utilised as 'tools', in order to maintain ethical practice during the research process.

For this research a detailed outline of all important ethical considerations is provided within Appendix A.

This research was granted ethical approval by The University of Chester's Faculty of Health and Social Care Research Ethics Committee (FHSC-REC) in 2012.

Participants

Population

The population for this research was identified to be qualified art therapists, who have been working with bilingual and or language learning clients and who did not share their first spoken language with the client.

However, whilst all possible candidates with the required experience have been welcomed to participate, those who were working within the National Health Service, were excluded, due to the need for further ethical approval through the NHS Ethics service and the timeframe set for this Master thesis.

Sample size

Morse (1994) suggests a sample size of at least six participants within a phenomenological research to gain best understanding upon the essence of the participant's experience. Therefore, the aim was to recruit at least six art therapists, who met the population criteria. However, when recruiting for this study just three participants came forward. As the study will utilise IPA as its data analysing approach, Smith and Osborne (2008) remark that a sample size of just three participants would still allow for thorough engagement with individual data but would also enable a researcher to identify similarities between the participants (ibid.).

Sampling approach

The ideal sample represents all relevant features of a population in the same proportion (Blaikie, 2010). According to Mark (1996), simple random sampling for example, gives every element in the population the same possibility of being selected. It is the most desirable form of sampling and less likely to produce bias samples. Yet, it may not always be the most effective and practical method to conduct a research, as it is for example not always possible to reach every member of the population, or the size of such population may be too big to allow for its data collection and analysis within a realistic or manageable timeframe (ibid.). Robson (2002) suggests a non-probability sampling approach to be used (for example snowball or convenience sampling), when it is not possible to specify the probability

that any element of a population is included or accessible for the study. However, convenience sampling, as Blaikie (2010) explains, is unlikely to produce representative samples and is therefore the most unconvincing form of non-probability sampling. Participants are chosen for reasons of availability or convenience; it is unlikely to control bias or to produce generalisation applicable to the whole population (Mark, 1996; Schober and Farrington 1998), making clear that this shall be noted as possible weakness and limitation in regards to research findings and outcome.

Despite this, (in order to ensure this master thesis is completed within the university's timeframe and thus its chosen processes allow for useful data and presentable results), the selection of participants through a convenience sample was identified to be the best approach.

Participant recruitment proceedings

As it was likely, that art therapists working for the researcher's placement provider meet the recruitment criteria of this study, the provider was contacted and permission was gained. During a staff meeting, research project was presented. This included a brief introduction to the study, possible issues of participation, data collection and protection as well as its voluntary basis. This was summarised within participant information sheets (Appendix C), which were handed out to ensure informed consent when participating within this study. As those art therapists were in a work related relationship with the researcher, great care was given to assure voluntary participation. No financial or other gain was offered for participation. Handing out an invitation return form (Appendix D) allowed for the collection of contact details of those art therapists interested in participation. However, only three therapists felt that they would meet the exact recruitment criteria. They were contacted within the next

fortnight and appointments for interviews were made. All three participants (one male and two female art therapists) took part.

Data Collection

Semi-structured interviews

Based upon the chosen phenomenologist framework, and having in mind, the similarity to Bird's (2012) study and observation that his approach in terms of data collection and analysis may have been too broad, this research follows a semi-structured research design, allowing for a more focused, but still flexible investigation. Semi-structured interviews, according to Broom and Willis (2007), are associated with interpretivists/constructionist paradigms and aim to collect data which allows the researcher to reflect upon interpretations and subjective meaning, identifying patterns or irregularities (ibid.). Rather than investigating a topic in a more general sense, a semi-structured interview allows, through the use of a set of open-ended questions for the topic of investigation to be defined and for a more focused and detailed, but still flexible discussion. Pre-prepared prompts can encourage the interviewee to respond to a specific question further. The use of probes allows one for example, to further investigate an original response by the interviewee (Bryman, 2008; Hancock, Ockleford and Windridge, 2009). However, Bryman (2008) highlights that interviewing skills are needed to ensure best possible data collection. Therefore Hancock et al. (2009) suggests that the novice researcher conducts a trial run, in order to get familiarised with the interview process and equipment used and also to eliminate possible issues due to unclear questions.

Interview design proceedings

Semi-structured questions and possible follow-on prompts were prepared and derived in correlation with this research's aims and objectives (see the interview guide in Appendix E). A trial run, with an experienced art therapist was conducted, which allowed for amendments to some of the questions prepared and familiarisation with the recording equipment used. Its data was afterwards destroyed and did not become part of this research.

Data collection preparation process

In order to conduct the interviews, the researcher used personal recording equipment. Interviews were planned to be conducted in a quiet and private room either in the university or within the placement provider's premises. In either case permission to use the premises would have been obtained. However, conducting the interviews in person, turned out to be difficult. This was due to reasons of physical distance and/or busy time schedules of the participants. Therefore, it was decided to offer the alternative option to conduct the interviews by telephone. This was agreed beforehand with the researcher's supervisor. Yet, Bryman (2008) points out that interviewing by telephone may place the researcher at a disadvantage as they could not see the interviewee's body language and thus might not be able to react to cues of confusion, puzzlement or discomfort. Nonetheless, Bryman (2008) also highlights evidence that in comparison, data gathered by telephone or face-to-face interviews would not differ significantly in terms of depth, quantity and nature of responses given to the interview questions.

One of the three participants was interviewed in person, two were interviewed by telephone.

In order to ensure that participants were fully informed about nature and possible issues when participating, their voluntarily participation and their permission to record the written consent was obtained, either before or on the day of the interview. Those interviewed by telephone, were sent consent forms and participant information sheets by post, along with a stamped, addressed envelope to return the forms to the researcher.

Data Analysis Method

Interpretative Phenomenological Analysis (IPA)

Due to its base within interpretavistic/constructionist paradigm and phenomenological tradition (Hancock et al., 2009), it felt best to analyse the collected data through IPA. Influenced especially by hermeneutics (Smith, Flowers and Larking, 2009) IPA recognises the researcher's interpretation and negotiation with the participant, when aiming to access the participants' world view. Emerging themes are coded and connections made which then construct themes of a 'higher order' (Hancock et al., 2009). According to Smith and Osborn (2008) when utilising IPA it is the researcher's aim to learn about the world of the participant and thus the meanings they give to the various views, elements and constructions constituting their world-views. This is achieved through a deep and structured interpretative engagement with the participant's data, collected through structured or semi-structured interviews. Providing a step-by-step guide, they suggest analysing each interview by starting first with note making, before transforming these into initial themes, then clustering those themes and when all interviews have been analysed, connecting and combining the clustered themes into overall master themes.

Data analysis procedure

After the interviews were transcribed, they were analysed using the process template suggested by Smith and Osbourn (2008). The suggested method to expand each transcript pages to their right and left with blank paper, became a helpful tool in order to make initial notes and to highlight important sections of the responses given (left) from which initial themes could be derived (right) (see Appendix F for the tables of initial and clustered themes of each individual participant). As the material appeared to very rich, it became helpful to refocus upon this study's aims and objectives, in order to derive master themes, which allow this study to answer the questions it set out to explore. The findings of this process will be presented within the following chapter.

5.1 INTRODUCTION

Within qualitative research, the presentation of the findings can be either separated from the discussion or interwoven (Leavy, 2011; Herbert, Jamtredt, Mead and Hagen, 2005). The latter, Herbert et al. (2005) points out, can make sense when keeping in mind that the results of qualitative research are an interpretation of the data collected. Combining both the findings and their interpretation (discussion), is believed to be the best approach for this research study, in order to allow the reader to retrace the conclusions made.

Within this chapter, a brief reference will be given of the participating art therapists own language backgrounds, followed by a general overview of the findings made. In order to answer this research's aims and objectives, each master theme will be presented in combination with their discussion; setting them into context of theoretical and research literature presented within this paper. This will be followed by a general summary of this research's findings. Possible limitations of this study will be discussed, recommendations for future research, art therapeutic training and practice will be made. Finally, the dissemination of this study's results will be considered.

Before discussing the findings, it shall be noted that great care was given to ensure confidentiality for the participants including their clients they may have referred to during the interviews. Any possible identifiers will not become subject to the following discussion. To ensure 'ease of read', participants will be referred to as Anton (participant one), Bennie (participant two) and Clara (participant three).

5.2 PARTICIPANTS' BACKGROUNDS

Both the theoretical and the research literature presented within this paper, highlighted that language (spoken) but especially language difference plays a dynamic role within therapeutic practice. Most studies which were concerned with the experience of therapists when working multilingual, focused attention upon bilingual and monolingual therapists' experiences (Costa and Dewaele, 2014) or bilingual therapist experience (Bird, 2004; and Kokaliari et al., 2013). Whilst this study, similar to Bowker and Richards (2004) did not recruit participants with any specifics to their own language ability, it was co-incidental that all of this study's participants happened to be monolingual. This is interesting as their accounts, given in relation to their work with bilingual and language learning clients, mirrored some findings of the above studies. Thus, the discussion of this current study's findings will refer and contrast, where appropriate, bilingual and monolingual therapists. It should be further noted that the participants related their experiences, as it appeared, mainly to those clients who were learning English and thus the language they would share with their therapist during their art therapeutic intervention.

Nonetheless, these research findings provide a rich insight into monolingual art therapist's experience when working with bilingual, especially language learning clients. They will answer, out of these perspectives, all the aims and objectives this research sets out to explore.

5.3 FINDINGS: OVERVIEW

Six master themes emerged as a result of the data analysis process, which were: 'Language barriers / barriers of understanding (general)', 'Client group (bilinguals / language learner) specific observations', 'Language difference = cultural difference',

‘Impact on the therapeutic relationship’, ‘Approaches to aid understanding (non art-based)’ and ‘Art as language’.

The table below illustrates these master themes in relation to the individual accounts given by the participants.

Master Themes	Participant 1 Anton	Participant 2 Bennie	Participant 3 Clara
1. Language barriers; barriers of understanding (general)			
When they matter	✓	✓✓✓	✓
...or why they do not matter	✓		✓
Art v. Language	✓		✓
2. Client group specific observations			
Observations / client group specific behaviour / communication behaviour	✓✓	✓✓	
3. Language difference = cultural difference	✓		✓
4. Impact on the therapeutic relationship			
Positive / negative impact observations	✓✓	✓✓✓	✓
5. Approaches to aid understanding (non art based)	✓	✓✓	✓
6. Art as language			
Art as alternative /universal language in Art Therapy	✓✓	✓	✓
Art as primary mode / source of communication	✓		✓
Art as communication tool /dialogue	✓✓	✓	✓

5.4 FINDINGS: SIX MASTER THEMES AND THEIR DISCUSSION

Language barriers / barriers of understanding (general)

One of the questions this study set out to explore was, whether language barriers, related to language differences, mattered within art therapeutic practice. Whilst all therapists referred to the communicational attributes of the image, two participants made concrete accounts of situations whereby spoken language difference was

experienced as difficult.

Anton highlighted in this respect situations in which, in line with ethical practice, the client needed to be informed about legal and general proceedings. To illustrate this, Anton chose the example of child protection legislation:

I have the information about why the child is being referred to me, which could be begged upon quite serious issues about a child's life – where a child has been abused – and obviously I am party to that information and it's not always clear that the child understands that I am party to that information...

...So, when a subject that might come up within the art work, that I might perhaps relate in my mind to the initial details of the referral, specifically around the issues of protection of the child, erm, that is something where at times I've erm I've found the language a problem – yeah, yeah a bit of a problem.

Bennie made clear that barriers of understanding would [just] be difficult to be overcome, when they would be combined with other client specific issues. Referring to a client who may have suffered from trauma and may also have had underlying learning difficulties, Bennie stated:

... it felt like ____ wasn't able to understand and even though I would slow my speech, I would draw what I meant. It felt like there was another barrier. ____ understood some things of course, but there were difficulties in understanding.

The discourse within art therapeutic literature, upon the way and preferences verbal expression should be utilised within practice appeared to be reflected within the

participant's responses. Two participants who, throughout highlighted that artistic expression would be the primary mode of communication in art therapeutic practice, also saw possible language barriers, related to language difference as less important.

For Clara, the non-verbal attributes of art making were the key to eliminating possible barriers in understanding:

...where there are language barriers, I think the art part of art therapy really comes into play because a client is able to perhaps express their cultural identity, aspects of where they come from, what country they come from, and that can create a dialogue without language (Clara).

Anton's general views on language differences as a possible barrier were even stronger.

Yeah, I have never thought about overcoming language barriers because I don't see the language difference as a barrier and I hardly even acknowledge the fact that we speak different languages, so the primary communication is through the artwork anyway, so I kind of ignore the fact that we are speaking different languages. I am not overcoming a language barrier; I am just completely ignoring the language.

Client group specific observations

Two participants shared observations of client group specific communication behaviours. Bennie, for example, observed that bilingual clients would, at times, switch into their first language.

...when they want to say something quickly, it will revert back to their original language... (Bennie).

Anton, also observed clients would switch between their languages:

...they just trip into their language...

When clients used their own language Anton noted:

*I find that when they use their own language it is more spontaneous, -
their reaction; their verbal reaction to something is far more
spontaneous...*

Both statements are interesting, as they can be seen to relate to those observations made by verbal psychoanalysts, regarding possible defences (made apparent by language switching) or language switching as more direct way to access affect-laden material and memory (see for example Pérez Foster, 1998 or Schrauff, 2000).

However, neither therapist referred to such possible implications. Bearing in mind that art therapeutic literature lacks reference to bilingual work, it raises the question whether they did know, but failed to mention such possible links, or that they were simply unaware. The latter would underline both, Bird's (2012) and Roberts' (2013) recommendation for the need to include bilingual awareness into art therapeutic training.

Language difference = cultural difference

Language is deeply interwoven with culture, it is not just part of, but also transmits and shapes culture (Hamers and Blanc, 2000) and thus influences both groups but also the individual's sense of identity and self-awareness (Thomas and Schwarzbaum, 2006; Hoffmann, 1991). Hence language expresses not just

belonging but also separateness, as it carries culture specific constructed ideas and a society's ways to make sense out of and evaluate environment (Hoffmann, 1991, Smith et al., 2003). Both, Clara and Anton appeared to make strong links between their client's bilingualism and cultural differences. This reflects Bird's (2013) findings that language difference, prompted participating art therapists to consider their clients culture. Especially, Clara's accounts were widely linked to bilinguals who had migrated to England and thus may have also brought culture differences with them:

I think when working with clients from a different country and who speak a different language and maybe have broken English, I think it's been really helpful to look at their past and their memories of where they came from, to really find an acceptance of how they really feel about where they live now and to really work through their cultural identity to re-enforce their confidence of who they are and not to get away from who or where they have come from, but to find acceptance of where they are now. ... (Clara).

Anton points out that cultural difference could carry assumptions and stereotypes which would become apparent through countertransferences.

I have to watch that, basically it is something that has come up a couple of times and knocked on that wall and it presses buttons and I have taken that into supervision...

The need to monitor cultural assumptions was also highlighted by all the participants (multi and monolingual therapists) participating in Costa and Dewaele's (2013) research study. Indeed, looking after that own cultural assumption and thus possible countertransferences are from a neutral nature are for Anton, an important component to offer art therapy successfully to his clients. Anton describes the resulting benefits as follows:

The moment I forget those cultural stereotypes then of course you know images, symbols and any type of artwork at all just becomes universal.

Transferences in connection to cultural assumptions were raised across many studies which explored therapist experiences in context of multilingual work. This included the need to scrutinise and monitor those thoughts and feelings within clinical supervision. However, studying such enquiries, it becomes clear that there are differences between bilingual and monolingual experiences in this regard. Therapists participating in Bowker and Richards study (2004) were moreover concerned with language proficiency and thus the therapist's expectations of being understood or their ability to understand their clients. In contrast, bilingual therapists participating in the study conducted by Kokaliari et al. (2013) and those participating in Costa and Dewaele's (2013) study, appeared to make greater reference to transferences which were based upon their own bilingual living experience. Hence, their relatedness to bilingual clients was seen to be important to be monitored within those therapists' clinical supervision. Both monolingual and bilingual therapists in Costa and Dewaele's (2013) enquiry similarly warned, as did Anton, of cultural assumptions in the context of multilingual work.

Bilingualism can trigger several emotions and feelings as, for example displacement or a difference of self-perception, depending upon the language a bilingual is using (Magnusdottier 2005; Pérez Foster, 1998). Whilst both Anton and Clara made strong connection of language difference to cultural difference, it appears that these connections were mainly based upon the appreciation of general otherness, rather than other cultural implications embedded within language (i.e. identity and self or feelings of belonging). Indeed, this would reflect the observations made by Bowker and Richards (2004) who observed that instead of separating bilingualism and

cultural awareness, they were often subsumed within therapeutic training and practice. In consequence, they assume bilingualism and its indications would be rarely addressed within clinical supervision and (general) therapeutic training (ibid.).

Impact on the therapeutic relationship⁶

Overall, language difference seemed to be understood to create a more intense relationship between art therapists and their clients. It also appeared that the therapists gave great(er) considerations to their interactions with their clients, in order to form a good working therapeutic relationship and thus able to provide meaningful therapy.

This resonated with other study's observations. For example, Bowker and Richards' (2004) and Costa and Dewaele's, (2013) studies highlighted that therapists who worked with clients of other language origin, would tend to give greater attention to other non-verbal aspects of communication and meaning of words. Bird (2012) observed that participating (bilingual) art therapists, in his study presented strong concerns of either being understood or being understandable. Similarly, the establishment of a good connection with their clients was for the participating therapists of Bowker and Richards study (2004) an important matter. This, it can be said, relates in one form or another, to all of this current study's participants, but Bennie's accounts especially reflected this:

⁶ The **therapeutic relationship**, or alliance, is according to Akhtar (2009) seen as an essential element to psychoanalytic therapy. It is formed between analysts and clients and described as being reality based, collaborative and harmonious. Or in other words; purpose, ethics, mutuality and trusts are those components which ensure a good working relationship between analyst and client in order to make clinical work possible. Akhtar (2009), further points out that such a relationship is closely linked to transference phenomena. Wood (2011) highlights the connection between a good therapeutic alliance and the positive outcome of therapy. Many art therapeutic scholars as for example, Case and Dalley (2006) point-out that the (art) therapeutic relationship incorporates the image and is referred to as '**triangular relationship**'. Dynamics of transference and countertransference between all three involved parties (analyst, client and image) form a further dimension to the therapeutic relationship and hence create interactions through which healing can take place (Edwards, 2004; Case and Dalley, 2006, Learmonth and Huckvale, 2008).

...rather than just asking lots and lots of questions [about the art work], it felt like the questions you asked were more specific and more direct.

When asked about her experiences of possible language barriers and their impact upon the therapeutic relationship, Bennie answered with an example of her work, which she regarded as a positive experience working with this client group. It illustrated how language difference impacted upon her approach to communicate and aid understanding with her client:

I was speaking a lot slower, I was thinking about what I was going to say more, I was making sure that he understood what I had said, I was making sure that it was a question worth asking, I was wanting to know the answer, I was giving positive feedback when ____ had said / revealed something about his image... so when we [the art therapeutic group] did ask questions about ____ artwork they were always, it felt like there was a lot more meaning putting into them because it was you knew that it was the one question you were asking.

However, at a later point it appeared that Bennie felt some tensions when trying to provide the right balance between the attention given to both, her client(s) and her own non-verbal communication behaviour, and the attention given to the overall difficulties her clients presented. Answering a question, if artistic expression, in her experience, can either substitute or compensate for possible language barriers, the following extract may illustrate this:

Because you are more aware of your body language, you are more aware of the relationship, erm you are very much, aware the way you are sitting, you are aware of the way you give off non-verbal [cues], you are able to express yourself in pictures, if possible; and you are able to draw what you cannot communicate and you are also able to work with their natural rhythms more

so you can sense how they are feeling and you can sense that sometimes the art process can be described in non-verbal ways – with hand gestures, the way you are sitting, with encouragement, positive feedback in the way you smile and the way that you look at the image – so almost like without the words, the non-verbal side makes you more aware of the way that you behave as a therapist. Either the way you are sitting and then you think that sometimes you might feel bad, that you are not talking as much, but then at the same time you feel that you over compensate by creating a containing environment - an environment that you want them to feel safe in.

A similar account was given by a psychotherapist participating in Bowker and Richards (2004) study, who referred to the extra effort to connect to the bilingual client with 'hypersensitivity', but felt similar to Bennie that this extra work had an overall enhancing effect upon the formation of the therapeutic relationship.

Anton too gave examples where language differences were experienced as having a positive impact upon the therapeutic relationship. As previously discussed, Anton observed that clients would be more spontaneous in their verbal expression when 'tripping' into their first language. Despite the fact that Anton would not have understood what his clients had said, the following extract may illustrate how Anton would utilise such situations positively:

I have noticed in close friendships as well when people from other countries just start talking to me in their native language and then we burst out laughing, and it's something about how they feel closer to me or are more comfortable with me, that [they] just assume that I understand their language and obviously and consciously know that I don't at all. ... it's just funny and in fact it's quite a close warm feeling that both people have exchanged because

that person is saying it in their native tongue. At a sub-conscious level it's a much closer communication relationship of some sort.

In fact, Bowker and Richard (2004) observed that therapists would make extra effort at all possible levels to listen to their bilingual clients, including those clients whose language proficiency was very good. As previously discussed, Clara found it helpful to appreciate her clients' cultural backgrounds. For her, imagery and the therapeutic relationship are essential in order to do so.

That's when the imagery and the therapeutic relationship really come into play.

Indeed, for Clara, artistic expression is an important key, enabling her to form a good therapeutic relationship with her clients. When referring to a migrant client she worked with, Clara says:

...their English was coming along very well, there was - wasn't that barrier, however, when looking at cultural identity and how the client felt about leaving his country, I think, the art really came into play and it broke down the barriers, the communication barriers of language and we were able to form a relationship from that really.

Approaches to aid understanding (non art based)

Another aim of this research study was to gain an understanding of what experienced art therapists might do in order to aid possible language barriers between themselves and their clients when not sharing a first language. Other studies discussed within this paper did not address this question as such. However, next to artistic expression, all three participants described other, non-artistic methods to aid understanding when

working with this particular client group. Generally, this would include the acknowledgement of language differences, when establishing therapeutic boundaries (Clara) and the acknowledgment of possible countertransferences emerging due to language related associations (Anton).

Literature from verbal orientated therapies, suggests that therapists when working in situations of language differences would mainly rely on pre-verbal and non-verbal forms of communication (Cooper and Randall (2002). In fact, Anderson et al.(1994) found that verbal and art therapists would use similar non-verbal forms of therapeutic communication. Bennie especially was emphasising such other forms of non-verbal communication as additional communication mode next to ongoing artistic expression. This would include body language, voice tone level and active observation, of those non-verbal cues given by both, herself and her clients.

...when I felt ____ didn't understand what I had said specifically in detail, I would give the impression where in body language and in the tone of voice that I was actively looking, so I would be like umm, you know not nice not even to use the word nice, but giving positive body language and giving positive movement of my hands to show that I was looking at her work.

Morrell (2011) suggests a considered switching between lingual and artistic modes of communication would enhance the therapeutic processes and thus contribute to positive change for the client. Anton reported he encouraged some of the clients he worked with to name or describe their art work in their mother-tongue, which he felt was received well by his clients.

I encourage them to name their [art] pieces and to describe what they are in their language – that they just write them down and they seem very, very

happy. That I receive that and I say it back to them even if I don't know what the hell it is. I then go home, type it into Google [translate] and hey presto!

In fact, Bird (2012) concluded within his study that the therapist's desire to understand the meaning and nature of words (including personal and social meanings) would positive impact upon the establishment of the therapeutic relationship and thus arguably upon therapy outcome itself.

Clara highlighted the helpfulness of allocating more time to the overall therapy process. This is interesting, as it seems not to have been picked up in any related literature as a helpful factor to be considered. Clara states:

I wouldn't say it was a slower process but perhaps having more time to be with a client who is of a different language maybe helpful certainly if there is a language barrier as well.

Art as language

Art and image making are seen as primary modes of communication within art therapeutic practice (BAAT, 2010). The therapeutic relationship or triangular relationship, as it is often referred to within the art therapeutic profession, is formed between client, art therapist and image. It is between these three actors that dynamics of transferences and countertransferences can take place and hence allow for healing interactions and processes to develop (Edwards, 2004; Case and Dalley, 2006, Learmonth and Huckvale, 2008). Indeed, for all three participating art therapists, of course, the artistic expression is of greatest importance, in order to communicate with their bilingual language learning clients and thus allow the therapeutic process and relationship to develop. Clara sees artistic expression as an

important tool to establish a dialogue with her clients. Anton too, uses image making as a tool to create an (artistic) dialogue with his bilingual clients.

...within the session I produce artwork myself reflecting the transference process with the client themselves. So, when it comes to the end of the session invariably there is a discussion that has taken place during the session through me creating artwork at the same time in parallel... (Anton).

In general Anton highlighted how he would utilise artistic expression as a tool to communicate with his clients. This could be distinguished between a more surface and a deeper, overarching quality of communication, which for Anton, would also relate to the quality of the therapeutic relationship.

...I would use visual art to do that all the time anyway it's a communication tool and that would be erm you know using crude graphics erm so you know timelines, clocks you know drawing clocks - the session is running out, using different cartoon figures about one person talking to another using different uniforms on them for symbolising, using caps or different facial expressions and body shapes again in a cartoonish stick men kind of styles ... but I mean that is one level of communication, then of course there is a [?] way of communication which is going all way through to the therapeutic relationship with the client - where you have a profound understanding - that is only within that sort of crucible of that relationship that is formed within therapy.

Bird's (2012) study, exploring bilingual art therapist's experiences, when not sharing their first language with their clients, revealed that bilingual art therapists would display an uncertainty regarding the connection between language (linguistic) and the image. However, rather than substitute for a shared language, imagery would

exist, for those therapists, parallel to language (not to be confused with general verbal communication), whereby the image or artefact would allow to tap into something beyond words or even something universal. Whilst this study's participating monolingual art therapists made no clear statement that imagery would replace a common language with their bilingual/language learning clients, it appeared that there was, especially for Clara, a general tendency to do so.

For me, it's almost breaking the barrier of the language by using the image as another language... (Clara).

When asked if imagery substitutes or compliments in her experience possible language barriers, Clara answers:

I think that's what makes art therapy most unique really because it does have that other element in our therapy where it doesn't rely completely on verbal communication – so the sub-conscious is allowed to come through the imagery rather than just through the verbal communication. So I think it kind of breaks down, breaks across all the borders really of none speaking to speaking or of different language.

However, replying to the same question, Anton echoes the bilingual therapists overall experiences, that the image would not substitute but exists parallel to language (Bird, 2012).

I think that it's a complete separate language in its own right. I never had any problems communicating through visual art. So I don't think that it does substitute or compliment, I just think that it is completely separate and stands on its own in its own right.

Nevertheless, it was not clear that all the participating monolingual therapists would have an understanding of the wider implications which bilingualism carries. Thus, it is

not clear if either Anton or Clara's above accounts would mirror the understanding of the bilingual therapists, participating in Bird's (2014) study, that artistic expression would exist parallel with language and thus would not necessarily substitute for language difference. The importance of this distinction however, may become important when taking Roberts' (2013) study of bilingual client experience into account. Here, Roberts (2013) highlighted that bilingual clients would not experience artistic expression as something which could compensate fully for their first language, including their cultural identity and self representation carried by it. Rather as a substitute, it is much more, Roberts points out, an additional possibility of expression.

What is clear however, is that artistic expression has a special role, not just in general art therapeutic practice, but especially where language difference exists between art therapist and client. Again, according to Cooper and Randall (2002), whilst verbal orientated therapists, will rely in such situations much more on pre and non-verbal forms of communication, all three participating art therapists in this study appeared to utilise and rely more upon communication through art and image making. Anton for example states:

... it's my favourite form of artwork really is to work with people that there is a complete cultural and language difference. It has to work with the artwork, it has to! Speaking and writing and all the rest of it becomes only a barrier and a problem I find and I love working with those client groups because it is the art itself, it has to be the art and it is the art that is the work communicating.

5.5 FINDINGS: SUMMARY

Overall all participants appeared to have successfully worked with this client group in the past (especially with language learners), addressing in their own individual ways language differences and difficulties in understanding. There were accounts where language difference would clearly matter. This comprised situations in which verbal communication would be necessary; due to legal and ethical obligations or in situations in which understanding would also be influenced by a client's overall condition. It appeared that language barriers would be experienced less or more relevant to art therapeutic practice, depending upon the art therapist's overall relationship to artistic and verbal expression within their own art therapeutic practice. This may reflect the general discourse in art therapeutic literature and practice, regarding the relationship between the use of words and imagery. However, the findings in general suggested that language difference would have an impact upon a therapist's approaches to aid understanding and the therapeutic relationship, which includes possible countertransferences.

Two participants made clear observations of their bilingual client's behaviour, which may be associated with the phenomena of language switching as an indicator of possible defences or the relations of memory and language, as discussed within the introductory chapter. However, there were no indications that the participating art therapists would have made these connections with their observations, which in turn could have informed their therapeutic approaches. A possible explanation for this might be related to Bowker and Richards's (2004) observations that bilingualism and its wider implications are rarely addressed in therapeutic training and supervision; as it is often subsumed within a general cultural awareness rather than acknowledged separately. As in this study, participating art therapists were also monolingual, having no personal experience of bilingual living. This too could explain why they appeared

unaware of implications their client behaviour may have presented.

Language difference was linked by two participants to cultural difference, which reflected other studies' observations, exploring therapists' experiences when working with language difference (for example: Costa and Dewaele, 2013; Bowker and Richards, 2004). There was an attempt to acknowledge bilingual clients' cultural background but also an understanding of the need to monitor personal countertransferences within clinical supervision, triggered by cultural assumptions and stereotypes.

As other studies discussed here, the establishment of a good connection with their bilingual/language learning clients was also important for this study's participants, in order to establish a good working relationship. Being more attentive to the clients and one's personal methods of communication but also acknowledging situations arising out of linguistic difference were experienced, seemed to have a more intense but positive impact upon the formation of the therapeutic relationship. The utilisation of artistic expression was for all participating art therapists highlighted as an important element in order to do so, especially when language barriers would occur.

Alongside artistic expression, all participants highlighted their individual, non-art based methods to ensure understanding between themselves and their clients of other language origin. One would consciously employ other non-verbal modes of communication; another would allow, where appropriate, the bilingual clients to use their first language and translate this later and the third therapist would consider time as helpful when working with language difference. Despite their differing approaches, what would generally appear to combine their methods to aid understanding would be the desire to find other or additional ways to ensure better understanding.

Whilst Cooper and Randall (2002) pointed out that verbal orientated therapists

would rely in situations of language difference much more upon pre and non-verbal forms of communication; art therapists participating in this study appeared to give greater weight to artistic communication, in order to overcome language barriers. In this context, artistic expression was utilised to create dialogue and reflection, on both a surface but also on a deeper level, in order to connect and aid understanding between art therapists and their bilingual clients. Artistic expression was also seen as language in its own right. Indeed, it appeared to be an effective therapeutic approach to work with language difference. However, whilst Bird's (2012) study highlighted an unease of bilingual art therapists to see the image as a replacement of a common language, there was the impression that the monolingual art therapists in this study presented a slight, but not totally clear, tendency to do so. This raises the question that if difference between the bilingual therapists of Bird's (2012) study and the monolingual therapists of this study may reflect a difference of general monolingual and bilingual living experiences, and thus may impact upon the therapist's views, if artistic communication is able to compensate for a shared spoken language.

5.6 LIMITATIONS

As discussed previously, qualitative research methods have been criticised because of their subjectivity or their difficulties in producing valid and/or generalisable outcomes due to the often small number of participants. However, it was argued that external validity and generalisability, in the sense of positivist's views are not at the heart of this research's interests. Still, in order to achieve a number of participants, which would encourage validity and generalisability within a qualitative research approach, the aim was to recruit at least six participants. This was not achieved and

just three were interviewed. Yet, it was also argued that using IPA as approach to data analysis would allow even a number of just three participants to produce an acceptable research outcome.

In connection with questions of subjectivity, it should be noted that the researcher as a bilingual person, may have produced a bias, based upon personal bilingual living experiences and convictions, especially with regard to the role of the image in the context of bilingual art therapeutic practice; which widely mirrors those conclusions made by Bird (2012) and Roberts (2013). Nevertheless, IPA takes the researcher's interpretation into account and allows for unexpected data to emerge (Smith, 2004).

Using a convenience sample may have produced further bias, regarding the participants' experiences. This may have been, for example, because all participants worked at the time of the interviews for the same organisations, and thus may have been similarly influenced by their feedback and approach when working with the specific client group in question. There were no 'tools' in place to explore whether this might have been the case (i.e. asking the participants if they have brought up issues regarding this client group, within supervision provided by this specific organisation). Therefore, this current study's ability to have created generalisable data, which is applicable to the whole population, may be taken with great caution. Nevertheless, it is important to say, that the accounts given by the three participants did at times show significant difference between their approaches to work with bilingual and language learning clients.

Collecting data via the telephone may have compromised the overall quality of those interviews, as the researcher may not have been able to pick up on and react to presented body language. However, the data collected for this study still provided

rich material, providing significant insight into the art therapists' experience when working with bilingual clients.

As this study did not set out to exclusively explore monolingual art therapists, it may have produced a monolingual bias. This also applied to the fact that this study's therapists appeared to relate their experience to language learning bilinguals and less to more language proficient bilinguals. However, both were considered and incorporated within analysis process and discussion, which allowed, out of these perspectives, for answers to all the questions this study set out to answer.

5.7 RECOMMENDATIONS

Future research

As previously discussed, there is a need to explore bilingualism/multilingualism, in context of art therapeutic work further. In particular the role of the image within this special therapeutic encounter may benefit from further investigations.

A qualitative study, comparing experiences of art therapists who are bilingual and those who are monolingual within the overall context of this research's interests, may address this.

It would also be interesting to explore bilingual clients' experience, who received art therapy in their second spoken language, in order to enlighten the subtle differences between the first spoken language, verbal expression and the language of imagery.

Art therapeutic training and practice

As highlighted at numerous occasions within this paper, bilingualism conveys many implications from interests for psychoanalytic practitioners.

Therefore, art therapeutic understanding need to distinguish language/bilingualism from verbal expression.

Moreover, bilingualism should be understood as a subordinate client group.

Awareness of the wider implications of bilingualism (i.e. possible perception of self and identity; the connection of language, memory and emotional laden words, access to emotional laden material and possible signs of defences related to language switching or language avoidance) should become subject to art therapeutic training and practice. This would include awareness of possible counter transferences related to bilingual work for both monolingual and bilingual art therapists.

Agreeing with recommendations made by both, Bird (2012) and Roberts (2013) the image should not be unquestionably seen as a replacement or substitute for language difference between therapist and client.

5.8 DISSEMINATION OF RESULTS

Next to disseminating research results in the form of a dissertation, Schober and Farrington (1998) advocate making research results and outcomes accessible to a wider audience. This has several benefits, including the possible improvement of health care and thus the well-being of clients. Methods of dissemination are for example, reports published in academic journals or other forms of media, presentations in research settings or conferences, or seminars offered to a study programme (ibid.).

Despite having not yet decided upon further avenues to disseminate these research results, but having argued that art therapeutic training and practice would benefit from awareness concerning the wider implications of the consideration to

disseminate its findings in form of a report, which may be offered for example to the UK's Art Therapy Journal 'Inscape' or in form of a presentation/workshop offered to art therapeutic training programmes (i.e. the MA Art Therapy Course offered at the University of Chester) might be indeed interesting.

However, Barker et al. (2002) point out, that whatever form of dissemination is chosen, the researcher needs to be aware of the specific forms of writing and requirements this may entail. This also includes obtaining all relevant permissions from the research host organisations and its funders, as well as ensuring its ethical accountability (Schober and Farrington, 1998).

This research study, placed within an interpretavistic/constructionist paradigm and informed by phenomenologist tradition, sets out to explore art therapist experiences when working with clients whose first language was not shared with the art therapist themselves. It aimed to explore questions such as: if language barriers would matter within art therapeutic practice; how and if language difference would be experienced and may influence the therapeutic relationship and processes, and how art therapists would overcome such situations in which communication may have been experienced as difficult. To answer such questions, this enquiry focused upon the strategies employed by the art therapists in order to overcome such difficulties, relating to language difference.

Despite this study's limitations, it still answered all the questions it set out to explore. Its findings suggested that language difference does matter within art therapeutic practice. This not only includes situations in which verbal expression becomes necessary but also the approaches chosen by the art therapists, to aid understanding and to form a good working relationship. Language difference was also linked to cultural difference, which was seen to carry possible countertransferences which needed to be monitored in clinical supervision. Next to the utilisation of artistic expression, all participants displayed a range of individual strategies to overcome possible language barriers. Indeed, artistic expression, as it can be understood as a language in its own right, took a great role for this study's participants, in order to create understanding between themselves and their bilingual clients. Yet, theoretical and research literature, discussed in this paper highlighted that bilingualism carries further implications, which when acknowledged may positively influence therapeutic

intervention with this subordinate client group. However, art therapeutic literature rarely acknowledges this. Next to this, it was pointed out that artistic expression cannot necessarily be understood as a replacement for a common language. Whilst it is not absolutely clear if this study's monolingual therapists made such assumptions it appeared that there was a tendency to do so. The additional comparison between other study's bilingual therapists experience and this study's monolingual therapist's experiences may have further highlighted the need to address the limited knowledge of bilingualism and language difference within the art therapeutic profession. Indeed, in order to create a better understanding of this subject matter, and thus to improve practice, further research addressing possible differences in mono and bilingual art therapists experiences and the role of the image when working with language differences might be beneficial. However, art therapy, as it offers the additional form of expression through art, can already be said to be a valuable form of psychotherapy for clients whose first language is different to the language spoken within their art therapeutic intervention. This was also confirmed by this research study. Despite that, none of the participating art therapists presented knowledge of a wider association with bilingualism, all of the therapists found successful ways to offer meaningful therapy to this client group. However, there is enough indication within the literature presented that would suggest that, if art therapists, either bilingual, multilingual or monolingual, would have a greater understanding of all the implications of bilingualism and general language difference, art therapy could become a truly powerful therapeutic approach, when working with this, indeed, suborientated client group.

REFERENCES

- Akhtar, S. (2009). *Comprehensive Dictionary of Psychoanalysis*. London, United Kingdom: Karnac Books Ltd.
- Akhtar, S. (1995). A Third Individuation: Immigration, Identity, and the Psychoanalytic Process. *Journal of the American Psychoanalytic Association*, 43, 4. pp.1051-84.
- Anderson, K., Gerber, S. & Appleton, V. (1994). *Parallels between Art and Verbal Therapeutic communication*. Retrieved August 5th, 2011 from <http://eric.ed.gov/PDFS/ED374366.pdf>
- BAAT [British Association of Art Therapists] (2005). *Code of Ethics and Principles of Professional Practice for Art Therapists*. Brighton, United Kingdom: British Association of Art Therapists.
- BAAT [British Association of Art Therapists] (2010). *What is Art Therapy?* Retrieved April 12th, 2011 from http://baat.org/art_therapy.html
- Barker, C., Pistrang, N. & Elliott, R. (2002). *Research Methods in Clinical Psychology: An Introduction for Students and Practitioners*. (2nd ed.). Chichester, United Kingdom: John Wiley & Sons Ltd.
- BBC [British Broadcasting Corporation] (2012). *Census shows rise in foreign born*. Retrieved June 22, 2014 from <http://www.bbc.co.uk/news/uk-20681551>
- Bird, J. (2012). Towards Babel: language and translation in art therapy. In H. Burt (Ed.). *Art Therapy and Postmodernism*. (pp.265-294). London, United Kingdom: Jessica Kingsley Publishers.
- Birchnell, J. (1984). Art therapy as a form of psychotherapy. In T. Dalley (Ed.). *Art as therapy*. (pp.15-29). Hove, United Kingdom: Tavistock Publications.
- Blaikie, N. (2010). *Designing Social Research*. (2nd ed.). Cambridge, United Kingdom: Polity Press.
- Bowker P. & Richards B. (2004). Speaking the same language? A qualitative study of therapists' experiences of working in English with proficient bilingual clients. *Psychodynamic Practice*, 10(4):459-478.
- Broom, A. & Willis, E. (2007). Competing Paradigms and Health Research. In M. Saks and J. Allsop (Eds.). *Researching Health, Qualitative, Quantitative and Mixed Methods*. (pp.16-31). London, United Kingdom: Sage.
- Bryman, A. (2008). *Social Research Methods*. (3rd ed.). Oxford, United Kingdom: Oxford University Press.
- Case, C. & Dalley, T. (2006). *The Handbook of Art Therapy*. New York, USA: Routledge.

- Colman, W. (2008). On being, knowing and having a self. *Journal of Analytical Psychology*, 53, 351-366.
- Cooper, A. & Randall (2002). Strangers to ourselves. In R. K. Papadopoulos (Ed.) *Therapeutic care for refugees: No place like home*. (pp.239-252). London, United Kingdom: Karnac Books Ltd.
- Costa, B. & J.-M. Dewaele (2014). Psychotherapy across languages: beliefs, attitudes and practices of monolingual and multilingual therapists with their multilingual patients, *Counselling and Psychotherapy Research: Linking research with practice*, 14:3, 235-244.
- Dokter, D. (1998). Introduction. In D. Dokter (Ed.), *Arts therapists, refugees and migrants: Reaching across borders* (pp.11-24). London, United Kingdom: Jessica Kingsley Publishers.
- Edwards, D. (2004). *Art Therapy*. London, United Kingdom: Sage Publications Ltd.
- Egan, G. (2010). *The Skilled Helper – A Problem-Management and Opportunity-Development Approach to Helping*. (9th ed.). Belmont, USA: Brooks/Cole, Cengage Learning.
- Hancock, B., Ockleford, E. & Windridge, K. (2009). *An Introduction to Qualitative Research*. Sheffield: The National Institute for Health Research EM/YH, 2007.
- Hamers, J., & Blanc, M. (2000). *Bilinguality and bilingualism*. (2nd ed.). Cambridge, United Kingdom: Cambridge University Press.
- Hammersley, M. & Trainanou, A. (2012). *Ethics in Qualitative Research: Controversies and Contexts*. London, United Kingdom: Sage.
- Herbert, R., Jamtredt, G., Mead, J. & Hagen, K.B. (2005). *Practical Evidence Based Physiotherapy*. Philadelphia, USA: Elsevier.
- Hoffmann, C. (1991). *An Introduction to Bilingualism*. London, United Kingdom: Longman.
- Hogan, S. & Coulter, M. (2014). *The Introductory Guide to Art Therapy: Experiential Teaching and Learning*. Hove, United Kingdom: Routledge.
- Holloway, I. & Wheeler, S (2010). *Qualitative Research in Nursing and Healthcare*. (3rd ed.).Oxford, United Kingdom: Wiley and Sons.
- HPC [Health Professional Council] (2007). *Standards of proficiency – Arts therapists*. London, United Kingdom: Health Professional Council.
- Jiménez, J. P. (2004). Between the confusion of tongues and the gift of tongues. Or working as psychoanalyst in a foreign language. *International Journal of Psychoanalysis*, 85, 1365-77.
- Katsavdakis, K.A., Sayed, M., Bram, A. & Bartlett, A. (2001). How was this story told in the mother tongue? An integrative perspective. *Bulletin of the Menninger Clinic*, 65, pp.246-265.
- Kilian, D. (2008). *Self Psychology, Art Therapy and Disorders of Self*. Doctoral Thesis. Retrieved from <http://hdl.handle.net/10210/553>

- Kokaliari, E. Catanzarite, G. & Berzoff, J. (2013). It Is Called a Mother Tongue for a Reason: A Qualitative Study of Therapists' Perspectives on Bilingual Psychotherapy—Treatment Implications. *Smith College Studies in Social Work*, 83:1, 97-118.
- Kroger, J. (1998). Adolescence as a second separation-individuation process: Critical review of an object relations approach. In E. E. A. Skoe & A. L. von der Lippe (Eds.), *Personality development in adolescence: A cross-national and life span perspective. Adolescence and society* (pp. 172-192). New York, USA: Routledge.
- Learmonth, M., & Huckvale, K. (2008) Art Psychotherapy: the wood in between the worlds. *New Therapist*, pp.11-19.
- Leavy, P. (2011) *Oral History: Understanding Qualitative Research*. New York, USA: Oxford University Press.
- Lewis, M. & Staehler, T. (2010) *Phenomenology: An Introduction*. London, United Kingdom: Continuum International Publishing Group.
- Magnusdottier, H (2005) Overcoming strangeness and communication barrier: a phenomenological study of becoming a foreign nurse. *International nursing review*, 52, 263-269.
- Malchiodi, C. A. (2003) *Handbook of Art Therapy*. New York, USA: The Guildford Press.
- Mark, R. (1996) *Research made simple - A handbook for social workers*. Thousand Oaks, USA: Sage Publications, Inc.
- Mason, J. (1996) *Qualitative Researching*. London, United Kingdom: Sage Publications Ltd.
- May, T. (2001) *Social Research - Issues, methods and processes*, 3rd edition, Maidenhead, United Kingdom: Open University Press.
- Molnos, A. (1995) *A Question Of Time: Essentials Of Brief Dynamic Psychotherapy*. London, United Kingdom: Karnac Ltd.
- Moon, B.L. (1994) *Introduction to Art Therapy: Faith in the Product*. Springfield, USA: Charles C. Thomas.
- Moon, B. L. (2006) *Ethical issues in Art Therapy*. (2nd ed.). Springfield, USA: Charles C. Thomas – Publisher, Ltd.
- Morrell, M. (2011) Sings and Symbols: Art And Language in Art Therapy. *Journal of Clinical Art Therapy*, 1(1), 25-32.
- Morse, J. M. (1994). Designing funded qualitative research.(pp.220-235).In Norman K. Denzin & Yvonna S. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed.). Thousand Oaks, USA: Sage.
- ONS [Office for National Statistics] (2011), *2011 Census: Quick Statistics for England and Wales, March 2011*. Statistical Bulletin. Retrieved June 22, 2014 from http://www.ons.gov.uk/ons/dcp171778_297002.pdf

- Pavlenko, A. (2005). *Emotions and Multilingualism*. Cambridge, United Kingdom: Cambridge University Press.
- Pérez Foster, RM. (1998). *The power of language in the clinical process – Assessing and treating the bilingual person*. Lanman, USA: Jason Aronson, Rowman and Littlefield Publishers, Inc.
- Reiners, G.M. (2012). *Understanding the difference between Husserl's (descriptive and Heidegger's (interpretive) phenomenological research*. Journal of Nursing and Care. :pp119-121.
- Riley, S. (2001). Art therapy with adolescents. *The western journal of Medicine*, 175, 54-60.
- Roberts, G. W. (2013). *Art psychotherapy: Understanding the experiences of first language Welsh speaking clients receiving art psychotherapy through the medium of English in north Wales*. Master's Dissertation. Retrieved from <http://chesterrep.openrepository.com/cdr/bitstream/10034/310922/7/roberts.pdf>
- Rubin, J.A. (2009). *Introduction to Art Therapy: Sources & Resources* New York, USA: Routledge.
- Rubin, J. A (2005). *Child Art Therapy*. Hoboken, NJ, USA: Jon Wiley and Sons, Inc.
- Robson, C. (2002) *Real World Research*. (2nd ed.). Oxford, United Kingdom: Blackwell Publishing.
- Santiago-Rivera, A. L., & Altarriba, J. (2002). The role of language in therapy with the Spanish-English bilingual client. *Professional Psychology: Research and Practice*, 33, 30-38.
- Schaverien, J. (2000) *The triangular relationship and the aesthetic counter transference in analytical art psychotherapy*. In A. Gilroy and G. McNeilly (Eds.). *The Changing Shape of Art Therapy – New developments in theory and practice* (pp.55-83). London, United Kingdom. Jessica Kingsley Publishers.
- Schaverien, J. (2008) *The Mirror of Art: Reflections on Transference and the Gaze of The Picture* (Presentation). Retrieved April 10, 2013 from <http://aras.org/docs/00037Schaverien.pdf>
- Schober, J., Farrington, A. (1998) *Trent Focus for Research and development in Primary HealthCare: Presenting and Disseminating Research*. Leicester, United Kingdom: Trent Focus.
- Schrauf, R. W. (2000). Bilingual autobiographical memory: Experimental studies and clinical cases. *Culture & Psychology*, 6, 387-417.
- Scott, J. & Marshall (2009). *A Dictionary of Sociology*. (3rd ed.). Oxford, United Kingdom: Oxford University Press.
- Seay Clauss, C. (1998) Language: the unspoken variable in psychotherapy practice. *Psychotherapy*, 35(2), 188-196.
- Skaife, S. (2000). Keeping the balance: Further thoughts on the dialectics of art therapy. In A. Gilroy and G. McNeilly (Eds.), *The changing shape of art therapy*:

New developments in theory and practice. London, United Kingdom: Jessica Kingsley Publishers.

- Skaife, S. & Huet, V. (1998). Dissonance and Harmony: Theoretical Issues in Art Psychotherapy Groups. In S. Skaife and V. Huit (Eds.). *Art Psychotherapy Groups: Between pictures and words*. (pp.17-43). London, United Kingdom: Routledge.
- Smith, J.A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. *Qualitative Research in Psychology*, 1, 39–54.
- Smith, P. K., Cowie, H., & Blades, M. (2003). *Understanding children's development* (4th ed.) Oxford, United Kingdom: Blackwell Publishing.
- Smith, J.A., Flowers, P. & Larkin, M. (2009). *Interpretative Phenomenological Analysis: Theory, Method and Research*. London, United Kingdom: Sage.
- Smith, J.A. & Osborn, M. (2003). Interpretative phenomenological analysis. In: J.A. Smith (Ed.) *Qualitative psychology: A practical guide to research methods*. London, United Kingdom: Sage.
- Stevens, A. (1994) *Jung – A Very Short Introduction*. Oxford, United Kingdom: Oxford University Press.
- Thomas, A. J. & Schwarzbaum, S.E. (2006). *Culture and Identity – Life Stories for Counsellors and Therapists*. (2nd ed.). London, United Kingdom: Sage Publications.
- Thwaite, P, Bennett, D., Pynor, H., Zigmond, H. (2003), Art and "the language of well-being". *Adolescent health care. Annals of the Academy of Medicine, Singapore*. 32,1, pp.71-7.
- Tomasello, M. (2003). *Constructing a language – A usage based theory of language acquisition*. London, United Kingdom: Harvard University Press.
- Ulman, E. (2012). Variations on a Freudian Theme: Three Art Therapy Theorists. (pp.289-305). In J.A. Rubin (Ed.) *Approaches to Art Therapy, Theory and Technique*. (2nd ed).New, York, USA: Routledge.
- Waller, D. & Dalley, T. (1992) .Art therapy: a theoretical perspective. In D. Waller & A. Gilroy (Eds.) *Art Therapy : A Handbook*. (pp.3-24). Maidenhead, United Kingdom: Open University Press.
- Wilson, M. (2000). Creativity and Shame Reduction in Sex Addiction Treatment. *Sexual Addiction & Compulsivity*. 7, 229-248.
- WMA [World Medical Association] (2013) *WMA: Declaration of Helsinki – Ethical Principles for Medical Research Involving Human Subjects*. Retrieved July, 22nd 2014 from: <http://www.wma.net/en/30publications/10policies/b3/index.html>
- Wood, C. (2011). Therapeutic Alliance. In C. Wood (Ed.) *Navigating Art Therapy – A Therapist's Companion* (pp.236-237). Hove, United Kingdom: Routledge.

ETHICAL CONSIDERATIONS IN REGARDS TO THE RESEARCH:

'I do not understand – or the art of understanding.

When do language barriers matter in Art Therapy and how to overcome them?

*A qualitative research into the experiences of art therapists when working with clients
of other language origin.'*

Avoidance of harm and distress

- As participants will be interviewed upon their professional experiences with certain clients, to whom they are bound to confidentially themselves, great care shall be given when designing the interview questions and conducting the interviews, in order to avoid any situation which could affect any accidental breach of conduct for the participants. In the unlikely event that clear and identifiable information of a third party is disclosed, such data shall not become subject of the investigation, anonymised and treated confidential and in line with the Data Protection Act-1998, as well as the ethical principles regarding confidentiality.

Potential benefits for participants

- There are no known benefits for, nor risk known, for the participants who take part at this study.

Health and safety issues for researchers

- There are no known risks for the researcher conducting this study.

Participant recruitment, criteria, reimbursement and relationship

- Participants will be approached verbally or through e-mail, being asked, if they having the required experience (i.e. have worked with clients they do not share the first language with / bilinguals) and would be interested in participating this study on a voluntary basis.
- All possible participants (art therapists with the required experience) are welcome to participate. However, art therapists, who working with/for the NHS may due to the need of additional ethical approval from the NHS Ethics service not being included in this research.
- The participants will neither receive payments nor any other initiatives in order to participate.
- Participants, who have to travel to take part at the study, however, will receive reimbursement of their travel costs.
- As some of the participants may be in a 'close' relationship to the student (researcher) being for example a colleague (from the student's placement), great care shall be given to ensure that none of the participants feel pressured out of any reason to participate.
- As some participants may be colleagues working for a specific organisation/institution, consent from that institution, allowing their employees to participate, shall be obtained and kept securely for the duration of the study.

Informed consent and confidentiality

- It will be ensured that all participants are competent and legally entitled to consent.
- Written consent (see 'Consent Form' within the appendices) will be obtained and participants will be adequately informed both verbally and will also be handed out an information sheet at least 24 hours beforehand (see 'Participant Information Sheet' within the appendices). The sheet should be fully understood by all participants before interviews are conducted.
- All participants have the right to withdraw from the research at any time and without any reason. Their records and collected data will then be destroyed if they so wish.
- Participants will be given contact details; these are included on the Participants Information Sheet, to enable them to withdraw or to discuss any upcoming question regarding the study and their participation.
- Participants will be asked to give consent to be recorded during the interview, in order to transcribe the interview at a later date. This is also explained within the provided information sheet. Relevant permission will be obtained through the consent form, regarding this study.

Management of Data

- Data will be obtained, stored and cared for in accordance with the Data Protection Act -1998.

- During data collection and its analysis:
 - Whilst recording the interview(s) the student will give greatest attention to whenever possible not to record any direct or indirect identifiers of the participant's identity.
 - Audio recordings will be as soon as possible, after recording has taken place, be transferred to a password protected computer through which it will be saved on an external hard drive.
 - The recording(s), after being transferred will be immediately erased from the audio recorder itself. If this is out of any reason not immediately possible, the audio recorder will be stored within a locked cabinet at the student's home.
 - Any digital stored data shall not be named in a way that may compromise the participant's anonymity.
 - All retained audio recordings and transcribed research data (in digital form) will be stored (saved) on an external hard drive. This hard drive, when not in use, will be stored in a locked cabinet within the student's home.
 - The student will work on a password protected computer.
 - Transcribed data (hard copy) will also be stored within the locked cabinet.
- After the research project is completed:
 - All digital data (audio recordings) will be transferred to an appropriate data-storage medium and together with printed transcriptions of the interviews, handed over to the student's academic supervisor _____ will in accordance with the University of Chester's – Faculty of Health and Social

Care policies on data protection, its retention and storage, store this data securely for a period of 10 years.

- The student will erase / destroy all data, stored at the student's home and devices.
- There is no plan at this point to share the obtained data with any third party.

CONSENT FORM

I do not understand – or the art of understanding.

When do language barriers matter in Art Therapy and how to overcome them?

A qualitative research into the experiences of art therapists when working with clients of other language origin.

Name of Researcher: Anja-Katharina Gallagher

Please tick box

1. I confirm that I have read and understand the information sheet datedfor the above study and have had the opportunity to ask questions. ☐
2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason or legal rights being affected. ☐
3. I give permission that I will be recorded during the research interview. ☐
4. I agree to take part in the above study. ☐

_____	_____	_____
Name of Participant	Date	Signature
_____	_____	_____
Name of Person taking consent	Date	Signature
(if different from researcher)		
_____	_____	_____
Researcher	Date	Signature

PARTICIPANT INFORMATION SHEET

I do not understand – or the art of understanding.

When do language barriers matter in Art Therapy and how to overcome them?

A qualitative research into the experiences of art therapists when working with clients of other language origin.

You are being invited to take part in a research study. Before you decide, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish, particularly if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

What is the purpose of the study?

This research aims to understand what experiences art therapists have made and what they find helpful, when working with clients who are not sharing their first language with the therapist (you) to overcome possible language barriers. When does spoken language matter within the art therapeutic encounter and when does it not, in regards to this specific client group.

Why have I been chosen?

You are chosen to participate, as you have worked before with this specific client group, therefore your experiences would be of great interest of this research project.

Do I have to take part?

No, of course your participation is entirely on a voluntary basis.

What will happen to me if I take part?

The research will be conducted through an interview. The researcher will ask for your permission to record the interview in order to transcribe and analyse the data at a later date.

What are the possible disadvantages and risks of taking part?

The interview is designed in such a way that you do not need to disclose any sensitive data or information concerning any client you may have worked with. However, if this does happen, the data will be treated confidentially, won't become subject to the study, anonymised or deleted /destroyed.

What are the possible benefits of taking part?

Of course adding your knowledge and experience to this research can be rewarding in itself, however there are no other benefits involved.

What if something goes wrong?

If something goes wrong and you feel uncomfortable with anything in regards to this study, you are welcome to discuss this with the researcher at any time. You have also the right to withdraw from the study at any time and without any reason- your data then would be destroyed if you wish so.

Will my taking part in the study be kept confidential?

Everything you say and contribute to the study will be treated confidentially. Transcribed data will be anonymised. Anything which could be connected to you personally will be disguised.

What will happen to the results of the research study?

The results of the research study will become part of the researcher's master dissertation.

Who is organising and funding the research?

This study is self – funded by the researcher.

Who may I contact for further information?

Please contact the researcher's supervisor, if you have any questions or concerns

Thank you very much for your interest in this research.

INVITATION RETURN FORM

Dear Art Therapist

I am a MA Art Therapy student in the Faculty of Health and Social Care at the University of Chester. I am undertaking a Master research project, which is titled:

‘I do not understand – or the art of understanding.

When do language barriers matter in Art Therapy and how to overcome them?

A qualitative research into the experiences of art therapists when working with clients of other language origin.’

As part of this research project I would like to invite you to take part in this study. I am hoping you may like to participate in a qualitative research interview, which I am planning to conduct. During the interview I will record our conversation in order to be able to transcribe the interview later on. I am anticipating that the duration of the interviews will take 60 minutes and shall not exceed 90 minutes maximum.

Confidentiality and anonymity will be maintained throughout the research study. This means that any identifiable information relating to you or the work you do will be kept anonymous. The data and transcripts will be destroyed after a period of 10 years.

I have enclosed an information sheet, with further information which may interest you. Before you will take part in this research, you will be asked to sign a consent form.

The findings of the study will illuminate what experiences art therapists have made and what they find helpful, when working with clients who are not sharing their first language with the therapist, to overcome possible language barriers. When does

spoken language matter within the art therapeutic encounter and when does it not, in regards to this specific client group.

If you would like to take part in this study, please complete and return the attached form. I will contact you to arrange with you an appointment for the research interview.

Thank you for your interest.

Yours sincerely

Anja Gallagher

Please return if you are willing to participate in this research study.

Name:.....

Address:.....

.....

.....

Telephone number:.....

Email address:.....

Thank you.

INTERVIEW GUIDE

1. Do you feel that verbal language barriers, between you and you(r) client(s) may impact upon the art therapeutic process?

- **If yes**, can you describe situations when you have experienced such problems and in which ways has this influenced your work?
- Can you describe in more detail the language history of those clients? (i.e. how long have they spoken English for at that time or how good their general English language abilities?)
- How did you acknowledge those moments or Language barriers?
 - o What did you do or tried exactly?
 - o In which way did you feel this was helpful (and why)?
 - o What did you feel was not successful (and why)?
- **If no**, out of which reasons do you feel this has no impact upon the art therapeutic process?
- What are exactly your experiences in this regard?

2. How can art/image making in your experience bridge verbal language barriers?

- Can you please give an example(s).

- 3. Did you feel that possible issues in terms of translation and understanding may have had an impact upon understanding and interpretation of the client's art work?**
- **If yes**, please describe in which ways you felt this impact became apparent.
 - **If no**, please give more detail why that was not the case.
- 4. Have you ever experienced a 'gap' where you felt that translation and understanding was not being able to be overcome?**
- **If yes**, how would you describe this 'gap'?
 - What do you think, may be the reasons for this?
 - Or how would you explain such a gap?
- 5. Thinking about all of this, are there any other observations you have made you feel are interesting or helpful when working with this specific client group?**

Tables of initial and clustered themes (participants 1, 2 and 3)

[Please note, mentioned page numbers relate to the interview transcripts]

Initial Themes

Participant 1

Language barriers

- communicating referral proceedings to client (pre-therapy)
- referring to referral reasons due to artwork content
- sees language difference as no barrier as art is the shared language in AT [p.8]

Art as language in its own right

Visual language – neither substitutes nor compliments verbal language

AT uses art/symbols to explain boundaries of therapy

Artistic communication – on two levels:

- therapeutic organisation
- therapeutic / therapeutic relationship

Artistic communication/dialogue to reflect transferences and counter transferences emergence from artwork

AT uses assessment period to understand artistic language development

AT uses own imagery to create dialogue

Therapeutic relationship positive influenced by language difference

- comical situations when client uses first language and AT does not understand
- AT encourages to use own language (written) – translates it later

Client communication behaviour

- clients can 'trip' into their first language (-> can create comical situations)
- AT observed clients using their first language to appear more spontaneous

Primary language is Art – therefore no barrier through verbal language difference [p8]

Language = cultural difference

- need to own reflection (something feels awkward – AT to reflect on - transferences due to cultural stereotyping (Supervision))
- elimination of cultural stereotyping -> **artistic expression becomes universal**

AT feels more motivated working with complete cultural/language difference [p10/11]

- it forces to use the art work as communicator
- > AT feels more relaxed (feels art as own primary form of communication)

Verbal / written language is not primary form of communication

- there is more communication in other ways
- verbal language does not cover all of what a person tries to express/ exchange
- > artistic expression closer to cover all of this (see above).

Clustering of initial themes

Participant 1

Language barriers

- communicating referral proceedings to client (pre-therapy)
- referring to referral reasons due to artwork content
- sees language difference as no barrier as art is the shared language in AT [p.8]

Verbal / written language is not primary form of communication

- there is more communication in other ways
- verbal language does not cover all of what a person tries to express/ exchange
(- > artistic expression closer to cover all of this)

ART language / communicator / transmitter to aid understanding

- Art as language in its own right
- Visual language – neither substitutes nor compliments verbal language
- artistic expression closer to cover all of a person communicational needs
(see above)
- Artistic communication – on two levels:
 - therapeutic organisation
 - therapeutic / therapeutic relationship
- Artistic communication/dialogue to reflect transferences and counter transferences
emerging from artwork
- AT uses art/symbols to explain boundaries of therapy
- AT uses own imagery to create dialogue

Client group specific observations

Client group communication behaviour (observations)

- clients can 'trip' into their first language (-> can create comical situations)
- AT observed; clients using their first language appear more spontaneous

Language difference = cultural difference

Impact on therapeutic relationship (through language difference)

- shared comical situations when client uses first language and AT does not understand (positive impact)
- AT feels more motivated working with complete cultural/language difference [p10/11]
-> it forces to use the art work as primary / absolute communicator

Client group specific approaches to therapeutic processes and relationship (AT)

- AT encourages to use own language (written) – translates it later
- AT uses assessment period to understand artistic language development

cultural difference

- transferences / counter transferences due to cultural stereotyping (need supervision)
- > elimination of cultural stereotyping -> **artistic expression becomes universal**

Initial Themes

Participant 2

Client's of same language origin may communicate at times in their language (AT not understanding)
[group work]

Client's may use their first language to say something quickly

Client's may give impression that they understood when they did not

- due to embarrassment
- due to lack of willingness to translate
- due to difficulties to develop new (English) language

Paraphrasing art work (talking about artwork) not always possible, due to language barrier

Uses non-verbal therapeutic communication methods

- body language
- voice tone level
- active looking

AT more aware of non-verbal cues of communication by client and by AT

AT gives more attention to:

- what to ask (content and words used for clarity) / more specific more direct [p.4-5]
- and own non-verbal cues to communication
 - > Creating Safe environment

AT's observation of client communication behaviour [with therapists]:

- more thoughtful answers
- more meaning put into images

AT feels that greater awareness and thought given

- has general positive impact [upon the therapeutic relationship]
- too much self-awareness of own non-verbal behaviour causes
AT to feel bad (fear to miss / not giving enough space to client
-> over compensating [p.7])

Language barrier which is not able to be overcome may be due to a client's other issues

Art carries universal symbols

Art symbolic communication and body language can aid communication

Participant 2

Language difference and impact on client and therapist's relationship and behaviour

Observations of client communication behaviour / language barrier client/therapist]

Client's of same language origin may communicate at times in their language
(AT not understanding) [group work]

Client's may use their first language to say something quickly

Client's may give impression that they understood when they did not

- due to embarrassment
- due to lack of willingness to translate
- due to difficulties to develop new (English) language

Paraphrasing art work (talking about artwork) not always possible, due to language barrier

Observations of client communication behaviour aiding understanding

- more thoughtful answers
- more meaning put into images

Art therapist communication behaviour

Uses non-verbal therapeutic communication methods

- body language
- voice tone level
- active looking

AT more aware of non-verbal cues of communication by client and by AT

AT gives more attention to:

- what to ask (content and words used for clarity) / more specific more direct [p.4-5]
- and own non-verbal cues to communication
 - > Creating Safe environment

Art therapist communication behaviour – **impact upon therapeutic relationship and processes**

AT feels that greater awareness and thought given

- has general positive impact [therapeutic relationship]
- too much self-awareness of own non-verbal behaviour causes
AT to feel bad (fear to miss / not giving enough space to client
-> over compensating [p.7])

Overcoming language barriers

- Art as communicator

Art carries universal symbols

- Art symbolic communication and body language can aid communication

- Language barrier(s) which are not to be overcome may be due to a client's other issues

Participant 3

- Association of language difference with culture difference
- Art as communicator of cultural identity
- Art making as non-verbal dialogue
- Art as general communicator
- Art as another language / source of communication
- Art substitute's language difference
- Art breaks down language barriers / breaks across all barriers of understanding
- Language difference impacts on **therapy process** (more time)
- **Understanding barrier** – due to cultural difference (not due to language)
- **Therapeutic relationship** through art therapeutic elements (**i.e. boundaries**)
 - through:
 - allowing client to own their work / describing it their way
 - acknowledging and working with language limitation / language expectation
 - acknowledging cultural history / past memories
- **Culture** impact on client
 - Memories - Identity - Confidence
- Culture impact on **therapeutic relationship** (AT can learn from client)
- Art as communicator – carries symbols and cultural information
- Cultural difference / **understanding aided by art making and therapeutic relationship**

Therapeutic relationship / acknowledgement of clients artwork and client to describe art work their way

General establishment of therapeutic elements (i.e. boundaries)

Participant 3

Art as primary source of communication

- Art as communicator of cultural identity/differences and as general communicator
- Art as another language / source of communication
- Creates a non-verbal dialogue
- Substitutes for language difference
- Art breaks down language barriers / breaks across all barriers of understanding

Culture = language differences (*associated with different language background*)

- Understanding barrier – due to cultural difference (not due to language)
- Culture (change) impact on client
 - Memories
 - Identity
 - Confidence
- Cultural difference / understanding **aided by** art making and **therapeutic relationship**

Barriers to understanding

AT's Observations:

- Understanding barrier – due to cultural difference (not due to language)

aided by:

- other elements of therapy (i.e. boundaries, therapeutic relationship) important

Therapeutic relationship through:

- allowing client to own their work / describing it their way
- acknowledging and working with language limitation / language expectations
- acknowledging cultural history / past memories
- other elements of therapy (i.e. boundaries) important

Helpful approaches working with client group:

- elements of therapy (i.e. boundaries) important
- therapeutic relationship / acknowledgement of clients artwork and client to describe art work their way.